

MULTNOMAH COUNTY OREGON

BOARD OF COUNTY COMMISSIONERS
ROOM 605, COUNTY COURTHOUSE
1021 S.W. FOURTH AVENUE
PORTLAND, OREGON 97204

GLADYS McCOY • CHAIR • 248-3308
PAULINE ANDERSON • DISTRICT 1 • 248-5220
GRETCHEN KAFOURY • DISTRICT 2 • 248-5219
RICK BAUMAN • DISTRICT 3 • 248-5217
SHARRON KELLEY • DISTRICT 4 • 248-5213
JANE McGARVIN • Clerk • 248-3277

Oriac

AGENDA OF

MEETINGS OF THE MULTNOMAH COUNTY BOARD OF COMMISSIONERS

FOR THE WEEK OF

December 18 - 22, 1989

*Tentative 2nd Rpt
1/18/90*

Monday, December 18, 1989 - 7:00 PM - Gun Safety Ordinance
David Douglas Performing Arts Center
1400 SE 130th Page 2
Carla

Tuesday, December 19, 1989 - 9:30 AM - Formal and
Planning Items . . . Page 3 *JAIR*

Tuesday, December 19, 1989 - 1:30 PM - Informal Meeting . . Page 4 *VAD*

Thursday, December 21, 1989 - 9:30 AM - Gun Safety Ordinance
World Trade Center Auditorium
121 SW Salmon
Portland Page 5
seating capacity: 227 *DJO* *Carla*

1:30 PM - Formal Page 6 *DJO*

-2-

Monday, December 18, 1989 - 7:00 PM

David Douglas Performing Arts Center
1400 SE 130th

Continued First Reading - An Ordinance to regulate the possession of firearms in public places, to establish a safety training course for firearms users and to impose fees

Tuesday, December 19, 1989 - 9:30 AM

Multnomah County Courthouse, Room 602

1. Continued Public Hearing on the boundaries of the proposed Rockwood Water Peoples Utility District

* * * * *

C 1-88 PERIODIC REVIEW

2. Resolution In the Matter of Submitting to the State the County's Local Review Order under ORS 197.640 (C 1-88)
3. First Reading - An Ordinance amending Multnomah County Comprehensive Framework Plan to comply with the Periodic Review requirements of the Oregon Department of Land Conservation and Development
4. First Reading - An Ordinance amending Multnomah County Code Chapter 11.05 to comply with the Periodic Review requirements of the Oregon Department of Land Conservation and Development
5. First Reading - An Ordinance amending Multnomah County Code Chapter 11.15 and selected Sectional Zoning Maps to comply with the Periodic Review requirements of the Oregon Department of Land Conservation and Development
6. First Reading - An Ordinance amending Multnomah County Code Chapter 11.45 to comply with the Periodic Review requirements of the Oregon Department of Land Conservation and Development

Tuesday, December 19, 1989 - 1:30 PM

Multnomah County Courthouse, Room 602

INFORMAL

1. Informal Review of Formal Agenda of December 21
2. Briefing concerning the 1989 Legislative Report Summary - Fred Neal
3. Policy direction from the Board regarding the proposal developed by Juvenile Justice Division for the Emergency Funds Reserve for Gang Involved Youth - Harold Ogburn, Howard Klink

PUBLIC TESTIMONY WILL NOT BE TAKEN AT INFORMAL MEETINGS

NOTE CHANGE OF LOCATION

Thursday, December 21, 1989

9:30 AM

WORLD TRADE CENTER AUDITORIUM

121 SW SALMON
PORTLAND, OREGON

ORDINANCES - NONDEPARTMENTAL

- R-1 Continued First Reading - An Ordinance to regulate the possession of firearms in public places, to establish a safety training course for firearms users and to impose fees

* * * * *

Thursday, December 21, 1989, 1:30 PM

Multnomah County Courthouse, Room 602

Formal Agenda

CONSENT CALENDAR

DEPARTMENT OF JUSTICE SERVICES

- C-2 Liquor License Renewal applications submitted by Sheriff's Office with recommendation that same be approved as follows:
Approved a) Package Store - Super Market Express, 16100 SE Stark;
Portland City Florist and Catering, 13607 SE Powell
b) Retail Malt Beverage - Velvet Keg, 12131 SE Holgate

REGULAR AGENDA

BOARD OF COUNTY COMMISSIONERS

- Approved* R-3 In the matter of the appointment of Luana Shipp and Laura Woodruff to the Community Health Council, term expiring June, 1992
- Approved* R-4 In the matter of the appointment of Thomas Mason and Marc Sussman to the Community Corrections Advisory Committee, terms expiring July, 1992

Approved R-5 In the matter of the appointment of Martha J. White to the Portland Multnomah Commission on Aging, term expiring June, 1990

Approved R-6 In the matter of the appointment and reappointments to the Integrated Pest Management Advisory Committee:
Appointment: Bruce A. Nelson, term expiring July, 1992.
Reappointments: Dr. David Dunnette, Marua Doherty, Albert J. Warren, Dr. David G. Adams, and David Reggiani, terms expiring July, 1992

DEPARTMENT OF ENVIRONMENTAL SERVICES

Approved R-7 Order in the Matter of Offering to Surrender Jurisdiction to the City of Portland all County Roads within the areas annexed to the City of Portland between January 1, 1989, and June 30, 1989
89-214

Approved R-8 Order in the matter of the Conveyance to the City of Portland Various One (1) Foot Strips (Street Plugs) and Road Fund Related Property adjacent to Former County Roads Previously Surrendered to the City of Portland Owned by the County, Item 88-164 (And Bargain and Sale Deed)
89-215

Approved R-9 Request approval of private sale of Tax Foreclosed property as provided by ORS 275.200 of LOMA ACRES, Exc S 62' & Exc N 70' of E 147' of Lot 7, located north of 747 SE 148th Ave.

Approved R-10 Notice of Intent to apply for a \$300,000 grant from the Oregon Department of Fish and Wildlife by the Parks Services Division, to be used for the construction of Chinook Landing Boating Facility on the Columbia River

DEPARTMENT OF GENERAL SERVICES

Approved R-11 Resolution in the matter of the approving of the issuance and negotiated sale of \$4,220,000 Series 1989B Taxable Certificates of Participation; approving and authorizing the Certificate Purchase Agreement, the Lease-Purchase and Escrow Agreement, and the Preliminary Official Statement and Official Statement; and designating an Authorized Officer
89-218

Approved R-12 Budget Modification DGS #8 making an appropriation transfer in the amount of \$19,643 from General Fund Contingency to Assessment & Taxation (Tax Collection/Information Section), establishing one position of Finance Specialist 1, with funding being offset by revenue the County will receive from HB 2338

- APPROVED R-13 Budget Modification DGS #9 making an appropriation transfer in the amount of \$200,000 from Data Processing Fund Contingency to Information Services, Capital Equipment, for the purchase of an upgrade to the County's existing Central Processing Unit (CPU)

DEPARTMENT OF HUMAN SERVICES

- APPROVED R-14 In the matter of ratification of an Intergovernmental Agreement with the 6255th United States Army Reserve Dental Service Detachment, whereby reserve personnel will provide dental service to County prisoners at Corrections Health Clinic
- APPROVED R-15 In the matter of ratification of an Intergovernmental Agreement between Tri-Met and Developmental Disabilities Program Office, for transportation services for Multnomah County residents only, for period July 1, 1989 to June 30, 1990
- APPROVED R-16 In the matter of ratification of an Intergovernmental Agreement with the Regional Research Institute at Portland State University for \$41,873 and Aging Services, for evaluation of two demonstration projects (The Oregon Partners in Energy Chronic Arrearages Project funded by the State Community Services, and the Homeless Family Self Sufficiency Project funded by the U.S. Department of Health and Human Services), for period July 1, 1989 to June 30, 1990
- APPROVED R-17 In the matter of ratification of 3 Intergovernmental Agreements to the State Community Services Contract, adding a total of \$188,894 to the County's omnibus contract, for period October 31, 1989 to June 30, 1990
- APPROVED R-18 In the matter of ratification of an Intergovernmental Agreements with a) Gresham Elementary School, and b) Barlow-Gresham Union High School, to reimburse the County for performing semi-annual inspections of food service operations until August 31, 1991
- APPROVED R-19 In the matter of ratification of an Intergovernmental Agreement amendment between Alcohol Treatment and Training Center, OHSU, and Multnomah County Alcohol and Drug Program Office, to pay for interpreter for hearing impaired DUII clients, for period July 1, 1989 to June 30, 1990

- APPROVED R-20 Budget Modification DHS #25 making an appropriation transfer in the amount of \$2,400 within Juvenile Justice from Materials & Services to Capital Outlay, for the purchase of a Wang Word Processing System upgrade
- APPROVED R-21 Budget Modification DHS #26 making appropriation adjustments for net total of \$40,460 in the Social Services (Children's Clinical Services) budget, reflecting actual program operating costs, and making adjustments in Personnel, related Materials & Services, telephone and building management line items

DEPARTMENT OF JUSTICE SERVICES

- APPROVED R-22 Budget Modification DJS #12 reflecting additional revenues in the amount of \$117,562 (ROCN Anti Drug Grant) and \$39,188 (Equitable Sharing) to the the District Attorney's Office, to apprehend and prosecute drug offenders

Thursday Meetings of the Multnomah County Board of Commissioners are recorded and can be seen at the following times:
Thursday, 10:00 PM, Channel 11 for East and West side subscribers
Friday, 6:00 PM, Channel 27 for Paragon Cable (Multnomah East) subscribers
Saturday 12:00 PM, Channel 21 for East Portland and East County subscribers

ANNOTATED AGENDA

Thursday, December 21, 1989

9:30 A.M.

ORDINANCES - NONDEPARTMENTAL

- R-1 Continued First Reading - An Ordinance to regulate the possession of firearms in public places, to establish a safety training course for firearms users and to impose fees

TESTIMONY TAKEN - NO ACTION.

1:30 P.M.

DEPARTMENT OF JUSTICE SERVICES

- C-2 Liquor License Renewal applications submitted by Sheriff's Office with recommendation that same be approved as follows:
a) Package Store - Super Market Express, 16100 SE Stark;
Portland City Florist and Catering, 13607 SE Powell
b) Retail Malt Beverage - Velvet Keg, 12131 SE Holgate

APPROVED

BOARD OF COUNTY COMMISSIONERS

- R-3 In the matter of the appointment of Luana Shipp and Laura Woodruff to the Community Health Council, term expiring June, 1992

APPROVED

- R-4 In the matter of the appointment of Thomas Mason and Marc Sussman to the Community Corrections Advisory Committee, terms expiring July, 1992

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- R-5 In the matter of the appointment of Martha J. White to the Portland Multnomah Commission on Aging, term expiring June, 1990

APPROVED

- R-6 In the matter of the appointment and reappointments to the Integrated Pest Management Advisory Committee:
Appointment: Bruce A. Nelson, term expiring July, 1992.
Reappointments: Dr. David Dunnette, Marua Doherty, Albert J. Warren, Dr. David G. Adams, and David Reggiani, terms expiring July, 1992

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APPROVED ORDER # 89-216

- R-8 Order in the matter of the Conveyance to the City of Portland Various One (1) Foot Strips (Street Plugs) and Road Fund Related Property adjacent to Former County Roads Previously Surrendered to the City of Portland Owned by the County, Item 88-164 (And Bargain and Sale Deed)

APPROVED ORDER # 89-215

- R-9 Request approval of private sale of Tax Foreclosed property as provided by ORS 275.200 of LOMA ACRES, Exc S 62' & Exc N 70' of E 147' of Lot 7, located north of 747 SE 148th Ave.

APPROVED ORDER # 89-217

- R-10 Notice of Intent to apply for a \$300,000 grant from the Oregon Department of Fish and Wildlife by the Parks Services Division, to be used for the construction of Chinook Landing Boating Facility on the Columbia River

DEPARTMENT OF GENERAL SERVICES

- R-11 Resolution in the matter of the approving of the issuance and negotiated sale of \$4,220,000 Series 1989B Taxable Certificates of Participation; approving and authorizing the Certificate Purchase Agreement, the Lease-Purchase and Escrow Agreement, and the Preliminary Official Statement and Official Statement; and designating an Authorized Officer

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APPROVED

DEPARTMENT OF HUMAN SERVICES

- R-14 In the matter of ratification of an Intergovernmental Agreement with the 6255th United States Army Reserve Dental Service Detachment, whereby reserve personnel will provide dental service to County prisoners at Corrections Health Clinic

APPROVED

- R-15 In the matter of ratification of an Intergovernmental Agreement between Tri-Met and Developmental Disabilities Program Office, for transportation services for Multnomah County residents only, for period July 1, 1989 to June 30, 1990

APPROVED

- R-16 In the matter of ratification of an Intergovernmental Agreement with the Regional Research Institute at Portland State University for \$41,873 and Aging Services, for evaluation of two demonstration projects (The Oregon Partners in Energy Chronic Arrearages Project funded by the State Community Services, and the Homeless Family Self Sufficiency Project funded by the U.S. Department of Health and Human Services), for period July 1, 1989 to June 30, 1990

APPROVED

- R-17 In the matter of ratification of 3 Intergovernmental Agreements to the State Community Services Contract, adding a total of \$188,894 to the County's omnibus contract, for period October 31, 1989 to June 30, 1990

APPROVED

- R-18 In the matter of ratification of an Intergovernmental Agreements with a) Gresham Elementary School, and b) Barlow-Gresham Union High School, to reimburse the County for performing semi-annual inspections of food service operations until August 31, 1991

APPROVED

- R-19 In the matter of ratification of an Intergovernmental Agreement amendment between Alcohol Treatment and Training Center, OHSU, and Multnomah County Alcohol and Drug Program Office, to pay for interpreter for hearing impaired DUII clients, for period July 1, 1989 to June 30, 1990

APPROVED

- R-20 Budget Modification DHS #25 making an appropriation transfer in the amount of \$2,400 within Juvenile Justice from Materials & Services to Capital Outlay, for the purchase of a Wang Word Processing System upgrade

APPROVED

- R-21 Budget Modification DHS #26 making appropriation adjustments for net total of \$40,460 in the Social Services (Children's Clinical Services) budget, reflecting actual program operating costs, and making adjustments in Personnel, related Materials & Services, telephone and building management line items

APPROVED

DEPARTMENT OF JUSTICE SERVICES

- R-22 Budget Modification DJS #12 reflecting additional revenues in the amount of \$117,562 (ROCN Anti Drug Grant) and \$39,188 (Equitable Sharing) to the the District Attorney's Office, to apprehend and prosecute drug offenders

APPROVED

0719C
12/21/89

DATE SUBMITTED: December 7, 1989

(For Clerk's Use)
Meeting Date 12/21/89
Agenda No. C-2

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: LIQUOR LICENSE

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Sheriff's Office DIVISION _____

CONTACT Sergeant Ed Hausafus TELEPHONE 255-3600

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Sergeant Ed Hausafus

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Attached is the Package Store liquor license renewal for the Supermarket Express, 16100 SE Stark, Portland, Oregon, 97233. The applicant, David H. Beaty, has no criminal record and we recommend that the application be approved.

ACTION REQUESTED:

(☐) INFORMATION ONLY (☐) PRELIMINARY APPROVAL (☐) POLICY DIRECTION (☒) APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA Consent Agenda

IMPACT:

PERSONNEL

(☐) FISCAL/BUDGETARY

(☐) GENERAL FUND

Other _____

RETURNED ORIGINALS
TO SHERIFF 12/22/89

CLERK OF
COUNTY COMMISSIONERS
1989 DEC 11 AM 11:22
MULTI-NOMINAL COUNTY
OREGON

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, OR COUNTY COMMISSIONER: Ed Hausafus

BUDGET / PERSONNEL _____ / _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) _____

OTHER _____
(Purchasing, Facilities Management, Etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

ETH/elc/55-AINT

LICENSE RENEWAL APPLICATION

OREGON LIQUOR CONTROL COMMISSION P.O. BOX 22297 PORTLAND, OREGON 97222 PHONE 1-800-452-6522

1990

SYMBOL	CLASSIFICATION	LICENSE FEE	DISTRICT	CITY/COUNTY	DPLRN	CODE
PS	PACKAGE STORE	\$50.00	1	2600	R00343A	F

IF YOU DO NOT COMPLETE THIS APPLICATION FULLY, WE WILL RETURN IT TO YOU FOR COMPLETION. WE CANNOT CONSIDER AN INCOMPLETE APPLICATION. YOUR LICENSE EXPIRES DECEMBER 31, 1989.

BEATY DAVID H
SUPER MARKET EXPRESS
16100 SE STARK
PORTLAND OR

97233

BEATY DAVID H
BEATY PAULA R

SUPER MARKET EXPRESS
16100 SE STARK
PORTLAND OR

97233

1. Please list a daytime phone number in case we need more information: 2546625
2. Were you or anyone else who holds a financial interest in these premises arrested or convicted of any crime, violation or infraction of any law during the past year? (DO NOT INCLUDE MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR BAIL FORFEITURE OF \$50.00 OR LESS WAS IMPOSED).
YES _____ NO X IF YES, PLEASE GIVE NAME OF INDIVIDUAL(S): _____

OFFENSE	DATE	CITY/STATE	RESULT

3. Will anyone share in the profits who is not a licensee? YES _____ NO X
If yes, please give name(s) and explain: _____

RENEWAL FEE

DO NOT MAIL CASH. ENCLOSE A CHECK OR MONEY ORDER FOR \$50.00 MADE PAYABLE TO "OLCC"

LATE RENEWAL ADDITIONAL FEE

The OLCC must receive your complete renewal application no later than 12-11-89, or you must pay an additional fee of \$12.50. IF YOUR APPLICATION IS RECEIVED AFTER 12-31-89, the additional fee increases to \$20.00. You may take your application to the nearest OLCC office, if your mailed application might not reach the Portland Office by the cut-off date.

ENDORSEMENT

The (CITY OR/COUNTY OF) MULTNOMAH recommends that this license be GRANTED X REFUSED _____

DATE OF ENDORSEMENT

SIGNED:

TITLE OF SIGNER:

Chair, BOARD OF COMMISSIONERS

SIGNATURES

EACH LICENSEE or authorized corporate officer must sign this application. If a licensee is not available, another person may sign ONLY if the signer includes legal authorization for the signature.

PRINT YOUR NAME

PRINT YOUR NAME

PRINT YOUR NAME

SIGNATURE

DATE

SIGNATURE

DATE

SIGNATURE

DATE

SOCIAL SECURITY NUMBER

D.O.B.

SOCIAL SECURITY NUMBER D.O.B.

SOCIAL SECURITY NUMBER

D.O.B.

DATE SUBMITTED: December 6, 1989

(For Clerk's Use)

Meeting Date _____

Agenda No. _____

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: LIQUOR LICENSE

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Sheriff's Office DIVISION _____

CONTACT Sergeant Ed Hausafus TELEPHONE 255-3600

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Sergeant Ed Hausafus

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Attached is the Package Store liquor license renewal for the Portland City Florist and Catering, 13607 SE Powell, Portland, Oregon 97236. The applicant(s) Leif and Janet Lynne Owens have no criminal record and we recommend that the application be approved.

ACTION REQUESTED:

(☐) INFORMATION ONLY (☐) PRELIMINARY APPROVAL (☐) POLICY DIRECTION (☒) APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA Consent Agenda

IMPACT:

PERSONNEL

(☐) FISCAL/BUDGETARY

(☐) GENERAL FUND

Other _____

CLERK OF
COUNTY COMMISSIONERS
1989 DEC - 8 PM 2:41
MULTNOMAH COUNTY
OREGON

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, OR COUNTY COMMISSIONER: Sgt Ed Hausafus

BUDGET / PERSONNEL _____ / _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) _____

OTHER _____
(Purchasing, Facilities Management, Etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

EH/slr/54-AINT

LICENSE RENEWAL APPLICATION

OREGON LIQUOR CONTROL COMMISSION P.O. BOX 22297 PORTLAND, OREGON 97222 PHONE 1-800-452-6522

1990

SYMBOL	CLASSIFICATION	LICENSE FEE	DISTRICT	CITY/COUNTY	DPLRN	CODE
PS	PACKAGE STORE	\$50.00	1	2600	R16356A	F

IF YOU DO NOT COMPLETE THIS APPLICATION FULLY, WE WILL RETURN IT TO YOU FOR COMPLETION. WE CANNOT CONSIDER AN INCOMPLETE APPLICATION. YOUR LICENSE EXPIRES DECEMBER 31, 1989.

OWENS JANET
 PORTLAND CITY FLORIST & CATERING
 13607 SE POWELL
 PORTLAND OR 97236

OWENS JANET
 OWENS LEIF

PORTLAND CITY FLORIST & CATERING
 13607 SE POWELL
 PORTLAND OR 97236

1. Please list a daytime phone number in case we need more information: 760-8744.
2. Were you or anyone else who holds a financial interest in these premises arrested or convicted of any crime, violation or infraction of any law during the past year? (DO NOT INCLUDE MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR BAIL FORFEITURE OF \$50.00 OR LESS WAS IMPOSED).
 YES NO IF YES, PLEASE GIVE NAME OF INDIVIDUAL(S): _____
- | OFFENSE | DATE | CITY/STATE | RESULT |
|---------|------|------------|--------|
| | | | |
3. Will anyone share in the profits who is not a licensee? YES NO
 If yes, please give name(s) and explain: _____

RENEWAL FEE

DO NOT MAIL CASH. ENCLOSE A CHECK OR MONEY ORDER FOR \$50.00 MADE PAYABLE TO "OLCC".

LATE RENEWAL ADDITIONAL FEE

The OLCC must receive your complete renewal application no later than 12-11-89, or you must pay an additional fee of \$12.50. IF YOUR APPLICATION IS RECEIVED AFTER 12-31-89, the additional fee increases to \$20.00. You may take your application to the nearest OLCC office, if your mailed application might not reach the Portland Office by the cut-off date.

ENDORSEMENT

The (CITY OR/COUNTY OF) MULTNOMAH recommends that this license be GRANTED X REFUSED _____

DATE OF ENDORSEMENT: DECEMBER 21, 1989

SIGNED: Gladys McBay TITLE OF SIGNER: CHAIR, BOARD OF COMMISSIONERS

SIGNATURES

EACH LICENSEE or authorized corporate officer must sign this application. If a licensee is not available, another person may sign ONLY if the signer includes legal authorization for the signature.

LEIF OWENS
 PRINT YOUR NAME

JANET LYNN OWENS
 PRINT YOUR NAME

PRINT YOUR NAME

Leif Owens 12/2/89
 SIGNATURE DATE

X Janet L. Owens 12/2/89
 SIGNATURE DATE

540-88-0510 10/9/61
 SOCIAL SECURITY NUMBER D.O.B.

X 540.86.5149/5/18/60
 SOCIAL SECURITY NUMBER D.O.B.

SOCIAL SECURITY NUMBER D.O.B.

DATE SUBMITTED: December 11, 1989

(For Clerk's Use)
Meeting Date _____
Agenda No. _____

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: LIQUOR LICENSE

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Sheriff's Office

DIVISION _____

CONTACT Sergeant Ed Hausafus

TELEPHONE 255-3600

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Sergeant Ed Hausafus

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Attached is the Retail Malt Beverage liquor license renewal for the Velvet Keg, 12131 SE Holgate, Portland, Oregon 97266. The applicant(s) Sandra J. Fleck and Charles F. Nakvasil have no criminal record and we recommend that the application be approved.

ACTION REQUESTED:

(☐) INFORMATION ONLY (☐) PRELIMINARY APPROVAL (☐) POLICY DIRECTION (☒) APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA Consent Agenda

IMPACT:

PERSONNEL

(☐) FISCAL/BUDGETARY

(☐) GENERAL FUND

Other _____

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, OR COUNTY COMMISSIONER: Sgt Ed Hausafus

BUDGET / PERSONNEL _____ / _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) _____

OTHER _____
(Purchasing, Facilities Management, Etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

EH/slr/57-AINT

LICENSE RENEWAL APPLICATION

OREGON LIQUOR CONTROL COMMISSION P.O. BOX 22297 PORTLAND, OREGON 97222 PHONE 1-800-452-6522 1990

SYMBOL	CLASSIFICATION	FEES	DISTRICT	CITY/COUNTY	DPLRN	CODE
RMB	RETAIL MALT BEVERAGE SERVER EDUCATION STUDENT FEE	\$200.00 2.60	1	2600	R00244A	C

IF YOU DO NOT COMPLETE THIS APPLICATION FULLY, WE WILL RETURN IT TO YOU FOR COMPLETION. WE CANNOT CONSIDER AN INCOMPLETE APPLICATION. YOUR LICENSE EXPIRES DECEMBER 31, 1989.

FLECK SANDRA J
VELVET KEG
12131 SE HOLGATE
PORTLAND OR

97266

FLECK SANDRA J
NAKVASIL CHARLES F

E

VELVET KEG
12131 SE HOLGATE
PORTLAND OR

97266

- Please list a daytime phone number in case we need more information: 256-9712
- Were you or anyone else who holds a financial interest in these premises arrested or convicted of any crime, violation or infraction of any law during the past year? (DO NOT INCLUDE MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR BAIL FORFEITURE OF \$50.00 OR LESS WAS IMPOSED).
YES ☐ NO ☒ IF YES, PLEASE GIVE NAME OF INDIVIDUAL(S): _____

OFFENSE	DATE	CITY/STATE	RESULT
- Will anyone share in the profits who is not a licensee? YES ☐ NO ☒
If yes, please give name(s) and explain: _____
- Did you make any significant changes in operation during the past year that you have not reported to the OLCC, such as changes in menu, hours of operation, or remodeling?
YES ☐ NO ☒ IF YES, EXPLAIN: _____

RENEWAL FEE / SERVER EDUCATION STUDENT FEE

DO NOT MAIL CASH. ENCLOSE A CHECK OR MONEY ORDER FOR \$202.60 MADE PAYABLE TO "OLCC".

LATE RENEWAL ADDITIONAL FEE

The OLCC must receive your complete renewal application no later than 12-11-89, or you must pay an additional fee of \$50.00. IF YOUR APPLICATION IS RECEIVED AFTER 12-31-89 the additional fee increases to \$80.00. You may take your application to the nearest OLCC office, if your mailed application might not reach the Portland Office by the cut-off date.

ENDORSEMENT

The (CITY OR/COUNTY OF) MULTNOMAH recommends that this license be GRANTED ☒ REFUSED ☐
DATE OF ENDORSEMENT: DECEMBER 21, 1989

SIGNED: Gladys McElroyTITLE OF SIGNER: CHAIR, BOARD OF COMMISSIONERS

SIGNATURES

EACH LICENSEE or authorized corporate officer must sign this application. If a licensee is not available, another person may sign ONLY if the signer includes legal authorization for the signature.

SANDRA J. FLECK
PRINT YOUR NAME

Sandra J. Fleck
SIGNATURE

DATE

342-48-0700 4-18-43
SOCIAL SECURITY NUMBER D.O.B.

CHARLES F. NAKVASIL
PRINT YOUR NAME

Charles F. Nakvasil
SIGNATURE

DATE

544-34-9474 7-29-35
SOCIAL SECURITY NUMBER D.O.B.

PRINT YOUR NAME

SIGNATURE

DATE

SOCIAL SECURITY NUMBER D.O.B.

NOTICE All employees who serve or sell alcoholic beverages MUST have a valid Service Permit.

DATE SUBMITTED 12/11/89

(For Clerk's Use)

Meeting Date 12-21-89

Agenda No. R-3,4,5,6

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: APPOINTMENTS

Informal Only* _____
(Date)

Formal Only Thurs, Dec 21, 1989
(Date)

DEPARTMENT County Chair DIVISION _____

CONTACT J Boyer TELEPHONE 248-3308

*NAME(s) Of PERSON MAKING PRESENTATION TO BOARD _____

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

see attached listing

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA _____

IMPACT:

☐ PERSONNEL
☐ FISCAL/BUDGETARY
☐ General Fund
☐ Other _____

1989 DEC 12 AM 10:15
CLERK OF COUNTY
OREGON

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: Madeline Coy

BUDGET / PERSONNEL _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) _____

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

Appointmehts to Community Health Council: Luana Shipp and Laura Woodruff
terms exlpire 6/92

Appointments to Community Corrections Advisory Committee: Thomas Mason
Terms expire 7/92 Marc Sussman

Appointment to the Portland Multnomah Commission on Aging: Martha J White
Term expires 6/90

Appointment to Integrated Pest Management Advisory Committee:
Bruce A. Nelson Term expires 7/92

Re-appointments to Integrated Pest Management Advisory Committee:
Dr. David Dunnette, Marua Doherty, Albert J. Warren, Dr. David G. Adams,
Dave Reggiani All terms expire 7/92



MULTNOMAH COUNTY OREGON

BOARDS AND COMMISSIONS

INTEREST FORM FOR BOARDS AND COMMISSIONS

In order for the County Executive to more thoroughly assess the qualifications of persons interested in serving on a Multnomah County board or commission, you are requested to fill out this interest form as completely as possible. You are encouraged to attach or enclose supplemental information or a resume which further details your involvement in volunteer activities, public affairs, civic services, published writing, affiliations, etc.

A. Please list, in order of priority, any Multnomah County boards/commissions on which you would be interested in serving. (See attached list)

- ① I am sitting on the Mult. Co. Welfare Board at present
- ② Community Action Administering Board
- ③ ~~Health (community) Board~~ Community Health Council

B. Name Luanne Low Shipp

Address 1325 S.E. Yamhill #3

City Portland, OR State OR Zip 97214

Do you live in _____ unincorporated Multnomah County or X a city within Multnomah County.

Home Phone 232-7933

C. Current Employer Disabled-retired -SSI

Address _____

City _____ State _____ Zip _____

Your Job Title _____

Work Phone _____ (Ext) _____

Is your place of employment located in Multnomah County? Yes _____ No _____

D. Previous Employers

Dates

Job Title

Multnomah County	1970-1980	Community Liaison Rep.
(MCCAA + Intergovernmental		Staff Asst.
Relation + Community Affairs-		Administrative Asst.
"IGR-CA" Office of County		Community
Management		Coordinator and Organizer

Portland State University

GLADYS MCCOY, MULTNOMAH COUNTY CHAIR

CONTACT:

Political Science Dept. 1968-71 Teaching Asst. Professor

1021 SW 4TH, ROOM 134
PORTLAND, OREGON 97204
(503) 248-3308

E. Please list all current and past volunteer/civic activities.

Name of Organization	Dates	Responsibilities
Democratic Central Committee (1956-60)		Treasurer
(Sohn Kennedy Campaign)		
Life long member of Democratic Party - Oregon		
Numerous Community Projects Throughout Oregon.		

F. Please list all post-secondary school education.

Name of School	Dates	Degree/Course of Study
Southwest ern OR Univ. College	1966-68	A.A. Liberal Arts
Portland State U.	1968-70	B.S. Pol. Science
PSU Graduate School	1970-71	M.A. Pol. Science
Graduated Highest Honors -	4.00 4.00 G.P.A.	

G. Please list the name, address and telephone numbers of two people who may be contacted as references who know about your interests and qualifications to serve on a Multnomah County board/commission.

Don Clark (Former Mult. Co. Exec.)

Dr. Ronald Chase (Legislative in Salem & Dean at PSU)

Rena Cosma - Metro Pol. Science

H. Please list potential conflicts of interest between private life and public service which might result from service on a board/commission.

none

I. Affirmative Action Information

F white

sex / racial ethnic background

birth date: Month 7 Day 18 Year 37

My signature affirms that all information is true to the best of my knowledge and that I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration or, subsequent to my appointment to a board/commission, may result in my dismissal.

Signature Laura Lou Shipp Date 9/6/89

lom
6/83



MULTNOMAH COUNTY OREGON

BOARDS AND COMMISSIONS

INTEREST FORM FOR BOARDS AND COMMISSIONS

In order for the County Executive to more thoroughly assess the qualifications of persons interested in serving on a Multnomah County board or commission, you are requested to fill out this interest form as completely as possible. You are encouraged to attach or enclose supplemental information or a resume which further details your involvement in volunteer activities, public affairs, civic services, published writing, affiliations, etc.

- A. Please list, in order of priority, any Multnomah County boards/commissions on which you would be interested in serving. (See attached list)

Portland Community Schools Advisory Council 1986-1990

- B. Name Laura Woodruff

Address 6705 N Seneca

City Portland State Oregon Zip 97203

Do you live in _____ unincorporated Multnomah County or ☒ a city within Multnomah County.

Home Phone 286-1119

- C. Current Employer disabled

Address _____

City _____ State _____ Zip _____

Your Job Title _____

Work Phone _____ (Ext) _____

Is your place of employment located in Multnomah County? Yes _____ No _____

- D. Previous Employers _____ Dates _____ Job Title _____

Aratey Corp. 1974-1989 distributor

CONTACT:

GLADYS McCOY, MULTNOMAH COUNTY CHAIR

1021 SW 4TH, ROOM 134

PORTLAND, OREGON 97204

(503) 248-3308

E. Please list all current and past volunteer/civic activities.

Name of Organization	Dates	Responsibilities
Champoeg Historical Pageant	1986-1989	musician etc.
Friends of Champoeg	1986-1989	

F. Please list all post-secondary school education.

Name of School	Dates	Degree/Course of Study
Eastern Oregon State College	1970-1972	music education

G. Please list the name, address and telephone numbers of two people who may be contacted as references who know about your interests and qualifications to serve on a Multnomah County board/commission.

Kathy Gordon	9322 N Oswego	286-9854
Mrs. L.F. Woodruff	2143 NE 95 th Pl.	252-8564

H. Please list potential conflicts of interest between private life and public service which might result from service on a board/commission.

I. Affirmative Action Information

F White
sex / racial ethnic background

birth date: Month 9 Day 9 Year 52

My signature affirms that all information is true to the best of my knowledge and that I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration or, subsequent to my appointment to a board/commission, may result in my dismissal.

Signature Kara Woodruff Date 10-9-89



MULTNOMAH COUNTY OREGON

BOARDS AND COMMISSIONS

INTEREST FORM FOR BOARDS AND COMMISSIONS

In order for the County Executive to more thoroughly assess the qualifications of persons interested in serving on a Multnomah County board or commission, you are requested to fill out this interest form as completely as possible. You are encouraged to attach or enclose supplemental information or a resume which further details your involvement in volunteer activities, public affairs, civic services, published writing, affiliations, etc.

- A. Please list, in order of priority, any Multnomah County boards/commissions on which you would be interested in serving. (See attached list)

Community Corrections Advisory Committee

B. Name Thomas M. Mason

Address 4919 N.E. 36th Ave.

City Portland State Or. Zip 97211

Do you live in _____ unincorporated Multnomah County or ☒ a city within Multnomah County.

Home Phone 282-6206

C. Current Employer Stay-Clean, Inc.

Address 5003 N.E. 13th Ave.

City Portland State Or. Zip 97211

Your Job Title Executive Director

Work Phone 282-1922 (Ext) _____

Is your place of employment located in Multnomah County? Yes ☒ No _____

D. Previous Employers _____ Dates _____ Job Title _____

J.C.'s Garden Center Nov. 1987-April 1989 Shipping/Receiving Mgr.

CONTACT:

Judy Boyer

GLADYS McCOY, MULTNOMAH COUNTY CHAIR

1021 SW 4TH, ROOM 134
PORTLAND, OREGON 97204

(503) 248-3308

E. Please list all current and past volunteer/civic activities.

Name of Organization	Dates	Responsibilities
<u>Inside, Outside People</u>	<u>1984-1987</u>	<u>Counseling Clients</u>
<u>Jesus Against Drugs</u>	<u>1986</u>	<u>Group Facilitator</u>
<u>Grandmothers Against Drugs</u>	<u>1985</u>	<u>Consultant</u>

F. Please list all post-secondary school education.

Name of School	Dates	Degree/Course of Study
<u>Federal City College</u>	<u>1969</u>	<u>Counselling</u>
<u>Psychological Institution</u>	<u>1976</u>	<u>Group Dynamics</u>
<u>Seattle Community College</u>	<u>1980-1982</u>	<u>Quality Control</u>

G. Please list the name, address and telephone numbers of two people who may be contacted as references who know about your interests and qualifications to serve on a Multnomah County board/commission.

Peggy O'Neil Corrections Div. Dept. of Human Resources 280 6040
Doreen Akkerman Research Assoc. United Way 226 9360

H. Please list potential conflicts of interest between private life and public service which might result from service on a board/commission.

I am presently the Executive Director of Stay-Clean, Inc., which provides
contractural services for the Department of Corrections.

I. Affirmative Action Information

Male/Moorish-American
sex / racial ethnic background

birth date: Month 7 Day 31 Year 36

My signature affirms that all information is true to the best of my knowledge and that I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration or, subsequent to my appointment to a board/commission, may result in my dismissal.

Signature _____ Date _____

also Rachel Phillips

GM copy to Judy
JUL 14 1987



MULTNOMAH COUNTY OREGON

BOARDS AND COMMISSIONS

INTEREST FORM FOR BOARDS AND COMMISSIONS

In order for the County Executive to more thoroughly assess the qualifications of persons interested in serving on a Multnomah County board or commission, you are requested to fill out this interest form as completely as possible. You are encouraged to attach or enclose supplemental information or a resume which further details your involvement in volunteer activities, public affairs, civic services, published writing, affiliations, etc.

- A. Please list, in order of priority, any Multnomah County boards/commissions on which you would be interested in serving. (See attached list)

1- Justice Co-ordinating Council 2- Community Corrections Advisory Committee;
3- Mental Health Advisory Committee

- B. Name Marc Sussman

Address 10324 SW 54th Place

City Portland State Oregon Zip 97219

Do you live in _____ unincorporated Multnomah County or ☒ a city within Multnomah County.

Home Phone 245-5349

- C. Current Employer Cox, Peterson + Sussman, Attorneys at Law (self)

Address 301 Lakeside Plaza, 8 North State Street, ~~1000~~ E

City Lake Oswego State Oregon Zip 97034

Your Job Title attorney

Work Phone 635-3546 (Ext) _____

Is your place of employment located in Multnomah County? Yes ☒ ^{Practice in county} No ☒ (office)

D. Previous Employers	Dates	Job Title
<u>Caroline Miller</u>	<u>9/85 - 7/87</u>	<u>Staff Assistant</u>
<u>Metropolitan Public Defender</u>	<u>1/81 - 9/85</u>	<u>Attorney</u>
<u>Self - Law Practice</u>	<u>1979 - 11/81</u>	<u>Attorney</u>
<u>Oregon State Parole Board</u>	<u>8/77 - 6/79</u>	<u>Hearings Officer</u>
<u>Bayonne (N.J.) Jewish Community Center</u>	<u>1971 - 1974</u>	<u>Social Worker</u>

GLADYS MCCOY, MULTNOMAH COUNTY CHAIR

CONTACT:

1021 SW 4TH, ROOM 134
PORTLAND, OREGON 97204

E. Please list all current and past volunteer/civic activities.

Name of Organization	Dates	Responsibilities
Oregon State Bar Corrections + Detention Committee	1980-83 1984-87	Chair 1982-83
Oregon Law Related Education Project	1986-87	mock trial advisor; Judge; courthouse tours

F. Please list all post-secondary school education.

Name of School	Dates	Degree/Course of Study
Willamette University ^{College of} Law	1974-1977	J.D.
Rutgers University	1969-1971	B.A. / History
Georgetown University School of ^{Foreign Service}	1967-1969	International Relations

G. Please list the name, address and telephone numbers of two people who may be contacted as references who know about your interests and qualifications to serve on a Multnomah County board/commission.

Caroline Miller, Commissioner, Dist 3	2730 NE Flinders Portland 97232 x52
Michael Schrank, District Attorney	600 Multnomah County Courthouse 3143

H. Please list potential conflicts of interest between private life and public service which might result from service on a board/commission.

none

I. Affirmative Action Information

male Jewish
sex / racial ethnic background

birth date: Month 03 Day 27 Year 50

My signature affirms that all information is true to the best of my knowledge and that I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration or, subsequent to my appointment to a board/commission, may result in my dismissal.

Signature _____ Date _____

lom
6/83

MARC SUSSMAN
Attorney at Law
10324 SW 59th Place
Portland, Oregon 97219

Residence: (503) 245-5349
Business: (503) 248-5217

BAR MEMBERSHIPS:

Oregon Bar; admitted September, 1977
United States District Court,
District of Oregon; admitted November, 1980

EDUCATION:

Legal -

Willamette University College of Law
Salem, Oregon Juris Doctor, May 1977
Academic Standing: Graduated in top 1/3 of
class
Honors: Dean's List
Activities: Founder and director of
People's Law School, a community legal
education program; class president,
second and third years; client
counselling competition, finalist; moot
court competition; curriculum
committees.

Undergraduate -

Rutgers University, Newark, New Jersey
1969-1971, B.A. History, cum laude, 1971
Georgetown University School of Foreign
Service, Washington, D.C. 1967-1969
Honors: Phi Beta Kappa; Phi Alpha Theta,
history honors society; dean's list.
Activities: Basketball, freshman, varsity;
founder and editor of campus magazine
on politics and arts.

High School -

Thomas Jefferson High School
Elizabeth, New Jersey graduated 1967

EMPLOYMENT EXPERIENCE:

Legal -

Staff Assistant - September 1985 -
Caroline Miller, Multnomah County
Commissioner
Provide legal counsel, research,
analysis and advice to commissioner on
proposed ordinances, resolutions and
policies relating to county government;
assist in the development of
legislative, corrections and budget
policies; represent commissioner at
meetings and public functions.

Trial Attorney - February 1981 - September 1985 Metropolitan Public Defender (Clackamas and Multnomah Counties)

Represented persons charged with crimes ranging from misdemeanors to major felonies, including homicides, robbery and sex crimes, throughout trial level; handled some appeals.

Sole Private Practice - February 1980 - February 1981

General practice with emphasis on family law, criminal defense, administrative law and appeals.

Associate of John Henry Hingson III

June 1979 - February 1980

General practice with emphasis on criminal defense, administrative law, family law and appeals.

Consultant - June 1979 Oregon Psychiatric Security Review Board

Drafted administrative rules to implement statutes creating PSRB

Hearings Officer - August 1977 - June 1979 Oregon State Parole Board

Conducted administrative hearings including parole revocation proceedings, served as legal staff to Advisory Commission on Prison Terms and Parole Standards when parole "matrix" system was formulated and drafted administrative rules implementing "matrix" system.

Law Clerk - October 1975 - June 1977

Edward J. Sullivan, Legal Counsel to Governor Robert Straub

Prepared background memoranda with recommendations on executive clemency applications, legal research, worked on extradition requests and analysis of proposed legislation

Non-Legal

Director, Senior Adult Vacation Center
New Jersey YM-YWHA Camps, Lake Como,
Pennsylvania - Summers 1975, 1976

Social Worker - August 1971 - August 1974
Bayonne Jewish Community Center, Bayonne,
New Jersey

PROFESSIONAL ACTIVITIES:

Chapter Author, "Parole", Oregon State Bar
Criminal Law CLE, 1986 edition; Oregon State
Bar Committee on Corrections and Detention,
1980-1983, 1984-1987, Chairman, 1982-1983;
Joint Interim Judiciary Committee on
Indigent Defense, 1984; Speaker, 1978 and
1985 Conferences of Oregon Criminal Defense
Lawyers Association; Teacher, parole classes
at Oregon State Prison; ACLU co-operating
attorney; Legislative testimony on behalf of
State Bar Committee, ACLU and Metropolitan
Public Defender; Moot Court judge; mock
trial advisor and judge.

PERSONAL:

Birthdate: March 27, 1950
Married to Judy Johnson, attorney, SAIF
Children: Aaron Isaac (10/12/82)
Rebecca Elyse (08/09/84)
Activities: Jewish Federation of Portland,
LEAD Program; Responsa Club;
basketball; softball.

REFERENCES:

Honorable James R. Ellis
338 Multnomah County Courthouse
1021 SW Fourth Avenue
Portland, Oregon 97204
(503) 248-3078

Michael Schrunk, District Attorney
600 Multnomah County Courthouse
1021 S.W. Fourth Avenue
Portland, Oregon 97204
(503) 248-3143

REFERENCES:

Honorable Irving Steinbock
Circuit Court Judge
716 Multnomah County Courthouse
1021 SW Fourth Avenue
Portland, Oregon 97204
(503) 248-3201

Honorable Sid Brockley
Circuit Court Judge
205 Clackamas County Courthouse
Oregon City, Oregon 97045
(503) 655-8686

Ron Cinneger, Assistant Director
Metropolitan Public Defender
630 SW Fifth Avenue
Portland, Oregon 97204
(503) 225-9100

Commissioner Caroline Miller
Multnomah County District #3
2730 NE Flanders
Portland, Oregon 97232
(503) 248-5217

Other references and a writing sample can be furnished on request.

APPLICATION

for Membership on the

PORTLAND/MULTNOMAH COMMISSION ON AGING (PMCoA)

for BOTH Commission and Committee Positions

1. Name Martha J. White
Address 4312 S.W. Freeman P (Zip) 97219
Phone (Home) 244-4978 (Work) —

2. Education: Please indicate highest level completed.

High School — College (Undergraduate) —
Other — College (Post-Graduate) ✓ B.A. +

3. Employment Status:

Employed Full Time — Retired —
Part Time ✓ Not Employed —

4. Current or past place of employment:

Organization/Address	Dates	Responsibilities
<u>Self-employed</u>	<u>1981 —</u>	<u>Bookkeeper</u>
<u>P Public Schools</u>	<u>1968-1974</u>	<u>Teacher</u>

5. Current and past volunteer/civic activities:

Organization/Address	Dates	Responsibilities
<u>Mult. Co. Citizen Inv. Com.</u>	<u>1985 —</u>	<u>Sub-Com. member</u> <u>Sec'y. Profrader</u>
<u>SWN Inc.</u>	<u>1983 —</u>	<u>Treas.</u>
<u>Central Precinct Adv. Com.</u>	<u>1989 —</u>	<u>—</u>

6. Why do you want to serve on the Commission/Committee?

To assist in helping the seniors in
Portland and Multnomah Co.

<input type="checkbox"/> Health	<input type="checkbox"/> Nursing Homes	<input checked="" type="checkbox"/> Community Services	<input checked="" type="checkbox"/> Medicare
<input type="checkbox"/> Media	<input type="checkbox"/> Transportation	<input checked="" type="checkbox"/> Social Security	<input type="checkbox"/> Employment
<input checked="" type="checkbox"/> Housing	<input type="checkbox"/> Nutrition	<input type="checkbox"/> Elder Abuse	<input checked="" type="checkbox"/> Mental Health
<input type="checkbox"/> Other (Please Specify) _____			

9. What PMCoA Committee are you interested in serving on?

☐ Health & Well Being ☐ Transportation ☐ Long-Term-Care Ombudsman
☐ Continuum of Care ☒ Area Agency on Aging

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Relationship</u>
y Stricker		245-8558	Friend

Since our bylaws require representation from certain categories of individuals we request your assistance in supplying this information.

Are you over 60? ✓ Under 60? Are you low-income? Yes No

Do you have a disability? Yes No 7

Ethnic origin: ☐ Black ☐ Native American ☐ Hispanic
 ☐ Asian ☒ White ☐ Other

The following persons shall be ineligible for membership on the PMCoA: Board members, paid professionals, or individuals with ownership interest in agencies who contract with/or receive substantial funds or benefit personally from the Area Agency on Aging (OAA, XIX, SSBG, OPI, etc.), County Dept. of Human Services, City Human Resources Bureau, State Dept. of Human Resources or Senior Service Division.

* Those ineligible for membership due to conflict of interest may serve on committees in a non-voting status.

Signature Martha J. White Date 11-12-89

Return completed application to: Becky Wehrli, Portland/Multnomah Commission on Aging,
1120 SW 5th Avenue, Room 518, Portland, OR 97204, PHONE 796-5269.

Term
7/92

11/91

B

NOV. 6 1989



MULTNOMAH COUNTY OREGON

BOARDS AND COMMISSIONS

INTEREST FORM FOR BOARDS AND COMMISSIONS

In order for the County Executive to more thoroughly assess the qualifications of persons interested in serving on a Multnomah County board or commission, you are requested to fill out this interest form as completely as possible. You are encouraged to attach or enclose supplemental information or a resume which further details your involvement in volunteer activities, public affairs, civic services, published writing, affiliations, etc.

A. Please list, in order of priority, any Multnomah County boards/commissions on which you would be interested in serving. (See attached list)

Integrated Pest Management Advisory Committee

B. Name Bruce Allen Nelson

Address 4922 NE Going Street

City Portland State OR Zip 97218

Do you live in _____ unincorporated Multnomah County or xxx a city within Multnomah County.

Home Phone 287-7690

C. Current Employer Collier Arbor Care

Address 4223 SE 88th Ave.

City Portland State OR Zip 97266

Your Job Title Arborist/ Pest Control Operator

Work Phone 774-9642 (Ext) _____

Is your place of employment located in Multnomah County? Yes xxx No _____

D. Previous Employers

Dates

Job Title

All Metro Spray

July 1985- April 1986

Pesticide Applicator

Washington State Dep. of Agr

Summer 1982

Research Technician

CONTACT:

GLADYS McCOY, MULTNOMAH COUNTY CHAIR

1021 SW 4TH, ROOM 134

PORTLAND, OREGON 97204

(503) 248-3308

E. Please list all current and past volunteer/civic activities.

Name of Organization	Dates	Responsibilities
Clackamas Co. Master Gardeners	1988- Present	Help set up pest collection
Portland Parks Bureau	1986-1988	IPM advisory committee

F. Please list all post-secondary school education.

Name of School	Dates	Degree/Course of Study
Washington State U	1981-1985	MS, Entomology
University of Pennsylvania	1969-1973	BA, African Studies

G. Please list the name, address and telephone numbers of two people who may be contacted as references who know about your interests and qualifications to serve on a Multnomah County board/commission.

Jean Cameron, Oregon Environmental Council, 2637 SW Water, Portland 97201 222-1963

James Dalton, 13879 S. Holcomb Blvd., Oregon City, OR 97045 655-6471

H. Please list potential conflicts of interest between private life and public service which might result from service on a board/commission.

At this time, I am not aware of any.

I. Affirmative Action Information

Male, Caucasian

sex / racial ethnic background

birth date: Month January Day 4 Year 1951

My signature affirms that all information is true to the best of my knowledge and that I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration or, subsequent to my appointment to a board/commission, may result in my dismissal.

Signature Bruce Allen Nelson Date 20 October 1989

lom
6/83

DATE SUBMITTED _____

(For Clerk's Use)
Meeting Date 12-21-89
Agenda No. R-7

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: _____

Informal Only* _____
(Date)

Formal Only December 21, 1989
(Date)

DEPARTMENT Environmental Services

DIVISION Transportation

CONTACT Bob Pearson

TELEPHONE 3838

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Bob Pearson

BRIEF SUMMARY

Recommendation of Director of Environmental Services for the surrendering of jurisdiction to the City of Portland, county roads within areas annexed to the City between January 1, 1989, and June 30, 1989.

ORDER offering to surrender jurisdiction to the City of Portland.

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA _____

IMPACT:

☐ PERSONNEL

☐ FISCAL/BUDGETARY

☐ General Fund

Other _____

COPY of ORDER SENT
TO BOB PEARSON 12/26/89

CLERK OF
COUNTY COMMISSIONERS
MULTNOMAH COUNTY
OREGON
1989 DEC 11 AM 11:17

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: _____

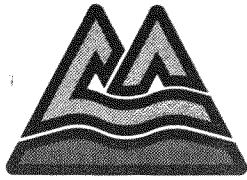
BUDGET/PERSONNEL _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) _____

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

3706V/1298W



MULTNOMAH COUNTY OREGON

DEPARTMENT OF ENVIRONMENTAL SERVICES
TRANSPORTATION DIVISION
1620 S.E. 190TH AVENUE
PORTLAND, OREGON 97233
(503) 248-5050

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

November 27, 1989

Multnomah County
Board of County Commissioners
1021 SW 4th Avenue, Room 602
Portland, Oregon 97204

Subject: Surrendering of Jurisdiction to the City of Portland of certain County roads lying within the corporate limits of the City of Portland.

Dear Commissioners:

In accordance with the Intergovernmental Agreement approved March 8, 1984, regarding the transition of urban services from the jurisdiction of Multnomah County to the City of Portland, Section III B, and in accordance with ORS 373.270, initiating the proceeding for the transfer of jurisdiction of certain County roads lying within the boundaries of the City of Portland; a public hearing is scheduled for December 21, 1989, at 9:30 a.m.

The public hearing is scheduled to provide the public the opportunity to voice support, concerns, or general testimony and to determine whether it is in the best interest of the County to surrender jurisdiction of those County roads within the City of Portland to the City of Portland. The list of roads has been advertised in the Oregonian on five successive Mondays, beginning November 20, 1989.

It is the recommendation of this Department, the Board of County Commissioners authorize the order offering to surrender jurisdiction to the City of Portland of those County roads.

The executed Order should be forwarded to Paul Niles, Right-of-Way Section, Room 814, Portland Building.

Very truly yours,



Paul Yarborough, Director
Environmental Services

PY:BP:vh

Attachments

3663V/1298W



CITY OF
PORTLAND, OREGON

OFFICE OF CITY AUDITOR

Barbara Clark, City Auditor
Council Division

1220 S.W. 5th, Rm. 202
Portland, Oregon 97204
(503) 248-4082

12-21-89
R-7

TO: B101/R606

Attached are copies of Ordinances/Resolutions which were
passed/adopted by the City Council on 12-21-89.

Please phone 248-4085 and give Council Agenda document number
if there are other ordinances you wish to receive.

CLERK OF
COUNTY COMMISSIONERS
1989 DEC 22 PM 2:33
MULTI-COUNTY
OREGON

Ordinance No. **162628**

- * Accept jurisdiction, effective January 1, 1990, of designated Multnomah County Roads in areas annexed to the City between January 1, 1989, and June 30, 1989. (Ordinance)

The City of Portland ordains:

Section 1. The Council finds:

1. Ordinance No. 155651, passed by Council on March 1, 1984, authorized execution of an Intergovernmental Agreement with the County of Multnomah, providing for the efficient and equitable distribution of transportation resources and responsibilities.
2. In accordance with the Intergovernmental Agreement and ORS 373.270, on July 1, 1984, the City accepted jurisdiction from Multnomah County of certain Multnomah County Roads within the corporate boundaries of the City of Portland, as those boundaries existed February 9, 1984.
3. The Intergovernmental Agreement also provides for the semi-annual transfer to the City of jurisdiction of County Roads within future City boundaries, as areas are annexed to the City.
4. The Multnomah County Commission took action December 21, 1989, to transfer jurisdiction to the City of certain County Roads which are specifically described in Exhibit "A," attached hereto.
5. The City should now accept jurisdiction of those certain County Roads, as described in attached Exhibit "A," within newly annexed areas of the corporate limits of the City of Portland, as those limits existed June 30, 1989.

NOW, THEREFORE, the Council directs:

- a. The City of Portland hereby accepts jurisdiction, effective January 1, 1990, of certain County Roads within the corporate limits of the City of Portland, as those limits existed June 30, 1989, said Multnomah County Roads being described in attached Exhibit "A," and by this reference, made a part hereof.
- b. That the Multnomah County Roads described in Exhibit "A" are hereby taken over, laid out and established as City streets, and that the City of Portland, from January 1, 1990 forward, shall have exclusive jurisdiction and control over the above described County Roads.

ORDINANCE No.

- c. That the City Auditor shall forward copies of this Ordinance to the County Commissioners of Multnomah County, the Multnomah County Director of Engineering Services, and the County Assessor.
- d. The City Auditor shall record a certified copy of this Ordinance, and return one copy of the recorded Ordinance to the Right-of-Way Acquisition Section, Bureau of Transportation Engineering.

Section 2. The Council declares that an emergency exists because a delay in acceptance of jurisdiction of the County Roads might adversely affect the City-County Financial arrangements; therefore, this Ordinance shall be in force and effect from and after its passage by the Council.

Passed by the Council, **DEC 21 1989**

Commissioner Earl Blumenauer
Kathryn Hall:mmv.wp
December 13, 1989
[Hall]ORD-Mult-C0-Roads

2

BARBARA CLARK
Auditor of the City of Portland
By *Mary Flanagan* Deputy

EXHIBIT A

List of County roads to be transferred to the City of Portland within the areas annexed to the City of Portland between January 1, 1989, and June 30, 1989.

Northeast Area

N.E. Brazee Court, No. 3032
(From N.E. 146th Drive to N.E. Knott Court.)

N.E. Brazee Street, No. 2976
(From N.E. 143rd Avenue to a point 420 feet, more or less, west of N.E. 143rd Avenue.)

N.E. Broadway Street, No.'s 2690 and 2891
(From N.E. 144th Avenue to N.E. 148th Avenue.)

N.E. Halsey Street, No.'s 732 and 3087
(From a point 130 feet, more or less, east of N.E. 155th Avenue to N.E. 157th Avenue.)

N.E. Hancock Street, No. 3480
(From N.E. 134th Avenue to N.E. 137th Avenue.)

N.E. Hancock Street, No. 2687
(From N.E. 144th Avenue to a point 580 feet, more or less, east of N.E. 144th Avenue.)

N.E. Knott Court, No. 3031
(From a point 160 feet, more or less, NW'ly of N.E. Brazee Court to N.E. 146th Drive.)

N.E. Knott Street, No. 2970
(From N.E. 141st Avenue to N.E. 144th Avenue.)

N.E. Marine Drive, No.'s 1167 and 1469
(From a point 1,240 feet, more or less, east of N.E. 33rd Drive to a point 4,585 feet, more or less, east of N.E. 33rd Drive.)

N.E. Russell Court, No. 3033
(From N.E. 146th Drive to a point 396 feet, more or less, SE'ly of N.E. 146th Drive.)

N.E. Russell Street, No. 2813
(From N.E. 141st Avenue to N.E. 143rd Avenue.)

N.E. Sacramento Street, No. 2969
(From N.E. 143rd Avenue to a point 170 feet, more or less, west of N.E. 142nd Avenue.)

Northeast Area, Cont'd

N.E. San Rafael Street, No. 2170

(From N.E. 132nd Avenue to a point 155 feet, more or less, east of N.E. 141st Avenue.)

N.E. San Rafael Street, No. 2170

(From a point 100 feet, more or less, west of N.E. 143rd Avenue to a point 290 feet, more or less, east of N.E. 144th Avenue.)

N.E. Schuyler Street, No. 3323

(From N.E. 134th Place to a point 170 feet, more or less, east of N.E. 134th Place.)

N.E. Weidler Street, No.'s 2448 and 4374

(From N.E. 146th Avenue to N.E. 148th Avenue.)

N.E. 133rd Avenue, No. 3760

(From N.E. San Rafael Street to a point 354 feet, more or less, NW'ly of N.E. San Rafael Street.)

N.E. 134th Place, No.'s 2335 and 2739

(From a point 108 feet, more or less, south of N.E. Schuyler Street to a point 225 feet, more or less, north of N.E. Eugene Street.)

N.E. 136th Avenue, No.'s 2337 and 2745

(From N.E. San Rafael Street to a point 760 feet, more or less, north of N.E. San Rafael Street.)

N.E. 137th Avenue, No. 2619

(From a point 95 feet, more or less, south of N.E. Hancock Street to N.E. San Rafael Street.)

N.E. 137th Avenue, No. 2621

(From N.E. San Rafael Street to a point 235 feet, more or less, north of N.E. San Rafael Street.)

N.E. 138th Place, No. 2182

(From a point 190 feet, more or less, south of N.E. San Rafael Street to a point 300 feet, more or less, south of N.E. San Rafael Street.)

N.E. 140th Avenue, No. 2444

(From a point 368 feet, more or less, south of N.E. San Rafael Street to a point 520 feet, more or less, south of N.E. San Rafael Street.)

N.E. 140th Avenue, No. 3294

(From N.E. San Rafael Street to a point 460 feet, more or less, north of N.E. San Rafael Street.)

Northeast Area, Cont'd

N.E. 141st Avenue, No. 2268

(From N.E. San Rafael Street to a point 675 feet, more or less, south of N.E. San Rafael Street.)

N.E. 141st Avenue, No. 2971

(From N.E. Russell Street to N.E. Knott Street.)

N.E. 142nd Avenue, No. 2977

(From N.E. Sacramento Street to a point 660 feet, more or less, south of N.E. Sacramento Street.)

N.E. 143rd Avenue, No.'s 2972 and 3079

(From N.E. Russell Street to a point 250 feet, more or less, south of N.E. Sacramento Street.)

N.E. 144th Avenue, No.'s 2746, 3062, and 3367

(From a point 90 feet, more or less, north of N.E. San Rafael Street to a point 410 feet, more or less, south of N.E. Broadway Street.)

N.E. 146th Avenue, No. 4482

(From N.E. Halsey Street to N.E. Weidler Street.)

N.E. 146th Drive, No. 3030

(From N.E. Sacramento Street to N.E. 148th Avenue.)

N.E. 147th Avenue, No. 723

(From a point 340 feet, more or less, south of N.E. Sandy Boulevard to a point 1,125 feet, more or less, south of N.E. Sandy Boulevard.)

N.E. 148th Avenue, No. 4874

(From a point 290 feet, more or less, south of N.E. Sandy Boulevard to a point 1,075 feet, more or less, south of N.E. Sandy Boulevard.)

N.E. 152nd Avenue, No. 2565

(From N.E. Halsey Street to a point 190 feet, more or less, southerly of N.E. Halsey Street.)

N.E. 156th Avenue, No. 4789

(From a point 835 feet, more or less, north of N.E. Halsey Street, to a point 900 feet, more or less, north of N.E. Halsey Street.)

N.E. 156th Avenue, No. 4138

(From N.E. Halsey Street to a point 455 feet, more or less, north of N.E. Halsey Street.)

N.E. 157th Avenue, No. 4500

(From a point 75 feet, more or less, north of N.E. Schuyler Street to a point 162 feet, more or less, north of N.E. Schuyler Street.)

Southeast Area

S.E. Stark Street, No.'s 924 and 2980
(From S.E. 142nd Avenue to S.E. 148th Avenue.)

S.E. 99th Avenue, No. 3879
(From S.E. Powell Boulevard to S.E. Bush Street.)

S.E. 102nd Avenue, No. 2365
(From S.E. Powell Boulevard to a point 450 feet, more or less, south of S.E. Powell Boulevard.)

S.E. 104th Avenue, No. 1250
(From S.E. Powell Boulevard to S.E. Bush Street.)

S.E. 108th Avenue, No. 4889
(From S.E. Powell Boulevard to a point 267 feet, more or less, south of S.E. Powell Boulevard.)

S.E. 111th Avenue, No. 3633
(From S.E. Powell Boulevard to a point 255 feet, more or less, north of S.E. Powell Boulevard.)

S.E. 142nd Avenue, No. 2435
(From S.E. Stark Street to a point 230 feet, more or less, south of S.E. Stark Street.)

S.E. 143rd Avenue, No. 1557
(From S.E. Stark Street to a point 311 feet, more or less, north of S.E. Stark Street.)

S.E. 146th Avenue, No. 2708
(From S.E. Stark Street to S.E. Alder Street.)

S.E. 146th Avenue, No. 1556
(From S.E. Stark Street to a point 310 feet, more or less, north of S.E. Stark Street.)

S.E. 148th Avenue, No.'s 1287 and 4204
(From S.E. Stark Street to a point 134 feet, more or less, south of S.E. Stark Street.)

Southwest Area

S.W. Terwilliger Boulevard, No. 1182

(From Clackamas County Line to a point 270 feet, more or less, NW'ly of the Clackamas County Line.)

Northwest Area

N.W. Thompson Road, No. 983

(From a point 720 feet, more or less, east of N.W. 90th Avenue to a point 1,570 feet, more or less, SE'ly of N.W. 90th Avenue.)



OFFICE MEMORANDUM . . . DEPARTMENT OF ENVIRONMENTAL SERVICES

TO: Jane McGarvin
Clerk of the Board

FROM: Bob Pearson
Transportation Division *Bob Pearson*

DATE: October 11, 1989

SUBJECT: Surrendering County Roads to the City of Portland

CLERK OF
CITY COMMISSIONER
1989 OCT 13 PM 2:56
HILLSBORO COUNTY
OREGON

Following is the tentative schedule to surrender county roads to the City of Portland of certain county roads within the city:

Department Head Meeting	October 30, 1989
BCC Set Hearing Date	November 9, 1989
First Advertisement	November 20, 1989
Second Advertisement	November 27, 1989
Third Advertisement	December 4, 1989
Fourth Advertisement	December 11, 1989
Fifth Advertisement	December 18, 1989
Public Hearing	December 21, 1989

BP:vh

cc Susan Schneider (City of Portland)
Paul Niles (City of Portland)
Ron Edson (City of Portland)
Paul Yarborough
Betsy Williams
Larry Nicholas
Ike Azar
Dick Howard
Don Hauskins
Mike Gilsdorf
Ed Pickering
Bob Johnson
John Dorst

4204V/5119V

For publication in the Oregonian on the
Mondays, November 20, 1989; November 27, 1989; December 4, 1989;
December 11, 1989, and December 18, 1989

MULTNOMAH COUNTY, OREGON
BOARD OF COUNTY COMMISSIONERS
Will hold a Public Hearing on the following:

TIME: 9:30 A.M., ON THURSDAY, DECEMBER 21, 1989

PLACE: ROOM 602, MULTNOMAH COUNTY COURTHOUSE

SUBJECT: A Public Hearing in the matter, and considering any objections or testimony offered by any person interested, and determine whether it is necessary, expedient or for the best interest of the County to surrender jurisdiction to the City of Portland all of the following described County Roads, within the areas annexed to the City of Portland between January 1, 1989, and June 30, 1989, as described in Boundary Change Final Order No's. 2577, 2584, 2585, 2599, 2617, 2618, 2630, 2631, 2633, and 2634 of the Portland Metropolitan Area Local Government Boundary Commission.

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Notice to Publish
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For further information call Multnomah County Transportation
Division, at 248-5050.

Please bill Account No. 1340604 for these services.

Please bill as follows:

Multnomah County Engineering Services
Attn: Ike Azar
1620 S.E. 190th Avenue
Portland, OR 97233

5119V

DATE SUBMITTED_____

(For Clerk's Use)

Meeting Date_____

Agenda No._____

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: Surrendering Jurisdiction of County Roads

Informal Only*_____

(Date)

Formal Only November 9, 1989

(Date)

DEPARTMENT Environmental Services

DIVISION Transportation

CONTACT Bob Pearson

TELEPHONE 248-3838

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Bob Pearson

BRIEF SUMMARY

Recommendation of the Director, Department of Environmental Services, in the matter of Surrendering Jurisdiction to the City of Portland of all county roads in the areas annexed to the city between January 1, 1989, and June 30, 1989, as described in Boundary Change Final Order No's. 2577, 2584, 2585, 2599, 2617, 2618, 2630, 2631, 2633, and 2634 of the Portland Metropolitan Area Local Government Boundary Commission.

Resolution setting December 21, 1989, as the date of public hearing and directing the County Engineer to cause notice of hearing to be published on five (5) different occasions in The Oregonian.

ACTION REQUESTED:

/ INFORMATION ONLY / PRELIMINARY APPROVAL / POLICY DIRECTION /X APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA_____

IMPACT:

PERSONNEL

/ FISCAL/BUDGETARY

/ General Fund

Other_____

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: _____

BUDGET/PERSONNEL _____ / _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) _____

OTHER _____

(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.



MULTNOMAH COUNTY OREGON

DEPARTMENT OF ENVIRONMENTAL SERVICES
TRANSPORTATION DIVISION
1620 S.E. 190TH AVENUE
PORTLAND, OREGON 97233
(503) 248-5050

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

October 11, 1989

Multnomah County
Board of County Commissioners
1021 SW 4th Avenue, Room 602
Portland, Oregon 97204

Subject: Surrendering Jurisdiction to the City of Portland of all County Roads
in the areas annexed to the City between January 1, 1989, and
June 30, 1989

Dear Commissioners:

In accordance with the Intergovernmental Agreement approved March 8, 1984, regarding the transition of urban services from the jurisdiction of Multnomah County to the City of Portland, Section III B, and in accordance with ORS 373.270, initiating the proceeding for the transfer of jurisdiction of all County roads within areas annexed to the City of Portland between January 1, 1989, and June 30, 1989, a public hearing is scheduled for December 21, 1989, at 9:30 a.m.

The public hearing is scheduled to provide the public the opportunity to voice support, concerns, or general testimony and to determine whether it is in the best interest of the County to surrender jurisdiction of those county roads to the City of Portland.

The list will appear in The Oregonian on five different Mondays, beginning Monday, November 20, 1989.

Very truly yours,

Paul Yarborough, Director
Environmental Services

PY:BP:vrh

Attachments

4204V/5119V

BEFORE THE BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY OREGON

In the Matter of the Surrendering Jurisdiction to)	<u>RESOLUTION</u>
the City of Portland all County Roads within the)	
areas annexed to the City of Portland between)	<u>SURRENDERING</u>
January 1, 1989, and June 30, 1989.)	<u>JURISDICTION</u>

WHEREAS, the Board of County Commissioners of Multnomah County, Oregon, having duly determined to initiate proceedings to surrender jurisdiction over all County Roads to the City of Portland, within the areas annexed to the City of Portland between January 1, 1989, and June 30, 1989, as described in Boundary Change Final Order No's. 2577, 2584, 2585, 2599, 2617, 2618, 2630, 2631, 2633, and 2644 of the Portland Metropolitan Area Local Government Boundary Commission;

WHEREAS, O.R.S. 373.270 grants authority for the County governing body to surrender jurisdiction of County Roads lying within the corporate limits of any city, it is hereby;

RESOLVED AND ORDERED that pursuant to the authority granted in O.R.S. 373.270, the Board of County Commissioners of Multnomah County, Oregon, hereby declares it is necessary, expedient and in the best interest of the County to surrender jurisdiction over said County Roads, to the City of Portland; and it is

FURTHER ORDERED, that the 21st day of December, 1989, at the hour of 9:30 A.M., in Room 602, Multnomah County Courthouse, Portland, Oregon, be fixed as the time and place for hearing the matter, and considering any objections or testimony offered by any person interested; and determine whether it is necessary, expedient or for the best interest of the County to surrender jurisdiction over the following County Roads, to the City of Portland, within the areas annexed to the City of Portland between January 1, 1989, and June 30, 1989, as described in Boundary Change Final Order No's. 2577, 2584, 2585, 2599, 2617, 2618, 2630, 2631, 2633, and 2644 of the Portland Metropolitan Area Local Government Boundary Commission;

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RESOLUTION
SURRENDERING JURISDICTION
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RESOLUTION
SURRENDERING JURISDICTION
Page 3

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(From N.E. San Rafael Street to a point 760 feet, more or less, north of N.E. San Rafael Street.)

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(From N.E. San Rafael Street to a point 235 feet, more or less, north of N.E. San Rafael Street.)

N.E. 138th Place, No. 2182
(From a point 190 feet, more or less, south of N.E. San Rafael Street to a point 300 feet, more or less, south of N.E. San Rafael Street.)

N.E. 140th Avenue, No. 2444
(From a point 368 feet, more or less, south of N.E. San Rafael Street to a point 520 feet, more or less, south of N.E. San Rafael Street.)

N.E. 140th Avenue, No. 3294
(From N.E. San Rafael Street to a point 460 feet, more or less, north of N.E. San Rafael Street.)

N.E. 141st Avenue, No. 2268
(From N.E. San Rafael Street to a point 675 feet, more or less, south of N.E. San Rafael Street.)

N.E. 141st Avenue, No. 2971
(From N.E. Russell Street to N.E. Knott Street.)

N.E. 142nd Avenue, No. 2977
(From N.E. Sacramento Street to a point 660 feet, more or less, south of N.E. Sacramento Street.)

N.E. 143rd Avenue, No.'s 2972 and 3079
(From N.E. Russell Street to a point 250 feet, more or less, south of N.E. Sacramento Street.)

N.E. 144th Avenue, No.'s 2746, 3062, and 3357
(From a point 90 feet, more or less, north of N.E. San Rafael Street to a point 410 feet, more or less, south of N.E. Broadway Street.)

RESOLUTION
SURRENDERING JURISDICTION
Page 4

N.E. 146th Avenue, No. 4482
(From N.E. Halsey Street to N.E. Weidler Street.)

N.E. 146th Drive, No. 3030
(From N.E. Sacramento Street to N.E. 148th Avenue.)

N.E. 147th Avenue, No. 723
(From a point 340 feet, more or less, south of N.E. Sandy Boulevard to a point 1,125 feet, more or less, south of N.E. Sandy Boulevard.)

N.E. 148th Avenue, No. 4874
(From a point 290 feet, more or less, south of N.E. Sandy Boulevard to a point 1,075 feet, more or less, south of N.E. Sandy Boulevard.)

N.E. 152nd Avenue, No. 2565
(From N.E. Halsey Street to a point 190 feet, more or less, southerly of N.E. Halsey Street.)

N.E. 156th Avenue, No. 4789
(From a point 835 feet, more or less, north of N.E. Halsey Street, to a point 900 feet, more or less, north of N.E. Halsey Street.)

N.E. 156th Avenue, No. 4138
(From N.E. Halsey Street to a point 455 feet, more or less, north of N.E. Halsey Street.)

N.E. 157th Avenue, No. 4500
(From a point 75 feet, more or less, north of N.E. Schuyler Street to a point 162 feet, more or less, north of N.E. Schuyler Street.)

Southeast Area

S.E. Stark Street, No.'s 924 and 2980
(From S.E. 142nd Avenue to S.E. 148th Avenue.)

S.E. 99th Avenue, No. 3879
(From S.E. Powell Boulevard to S.E. Bush Street.)

S.E. 102nd Avenue, No. 2365
(From S.E. Powell Boulevard to a point 450 feet, more or less, south of S.E. Powell Boulevard.)

S.E. 104th Avenue, No. 1250
(From S.E. Powell Boulevard to S.E. Bush Street.)

RESOLUTION
SURRENDERING JURISDICTION
Page 5

S.E. 108th Avenue, No. 4889
(From S.E. Powell Boulevard to a point 267 feet, more or less, south of S.E. Powell Boulevard.)

S.E. 111th Avenue, No. 3633
(From S.E. Powell Boulevard to a point 255 feet, more or less, north of S.E. Powell Boulevard.)

S.E. 142nd Avenue, No. 2435
(From S.E. Stark Street to a point 230 feet, more or less, south of S.E. Stark Street.)

S.E. 143rd Avenue, No. 1557
(From S.E. Stark Street to a point 311 feet, more or less, north of S.E. Stark Street.)

S.E. 146th Avenue, No. 2708
(From S.E. Stark Street to S.E. Alder Street.)

S.E. 146th Avenue, No. 1556
(From S.E. Stark Street to a point 310 feet, more or less, north of S.E. Stark Street.)

S.E. 148th Avenue, No.'s 1287 and 4204
(From S.E. Stark Street to a point 134 feet, more or less, south of S.E. Stark Street.)

Southwest Area

S.W. Terwilliger Boulevard, No. 1182
(From Clackamas County Line to a point 270 feet, more or less, NW'ly of the Clackamas County Line.)

Northwest Area

N.W. Thompson Road, No. 983
(From a point 720 feet, more or less, east of N.W. 90th Avenue to a point 1,570 feet, more or less, SE'ly of N.W. 90th Avenue.)

RESOLUTION
SURRENDERING JURISDICTION
Page 6

BE IT FURTHER ORDERED, that Larry F. Nicholas, County Engineer, or his designated representative, is hereby directed to give due and legal notice of said hearing by causing the notice to be published on November 20, November 27, December 4, December 11, and December 18, 1989, in the Oregonian, a newspaper of general circulation, in accordance with the provisions of the Oregon Revised Statutes.

Dated the _____ day of _____, 1989.

(SEAL)

BOARD OF COUNTY COMMISSIONERS
FOR MULTNOMAH COUNTY, OREGON

Gladys McCoy, Chair

REVIEWED:

LAURENCE KRESSEL, County Counsel
for Multnomah County, Oregon

By _____

4204V/5119V

DATE SUBMITTED _____

(For Clerk's Use)
Meeting Date 12/21/89
Agenda No. R-8

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: _____

Informal Only* _____
(Date)

Formal Only X _____
(Date)

DEPARTMENT Environmental Services

DIVISION Transportation

CONTACT Bob Pearson

TELEPHONE 248-3838

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Bob Pearson

BRIEF SUMMARY

Bargain and Sale Deed conveying one (1) foot strips (street plugs) and road fund related property owned by Multnomah County to the City of Portland in areas annexed to City (Item 88-164).

Order authorizing execution of deed.

The purpose of this Bargain and Sale Deed and Order is to supersede that certain deed for road purposes and order authorized by the Board of County Commissioners on May 11, 1989, and recorded May 31, 1989, in Book 2207, Pages 2628 - 2648.

DO NOT RECORD EXECUTED DEED

SEND TO PAUL NILES, R/W SECTION, CITY OF PORTLAND

ACTION REQUESTED:

/ INFORMATION ONLY / PRELIMINARY APPROVAL / POLICY DIRECTION /X APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA 2 minutes

IMPACT:

/ PERSONNEL

/ FISCAL/BUDGETARY

/ General Fund

Other _____

ORIGINAL Bargain & Sale Deed sent to Paul Niles?
COPY of ORDER and
BARGAIN & SALE DEED
SENT TO BOB PEARSON 12/26/89

1989 DEC 13 AM 9:10
COUNTY COMMISSIONER
MULTNOMAH COUNTY
OREGON

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: _____

BUDGET/PERSONNEL _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) _____

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.



MULTNOMAH COUNTY OREGON

DEPARTMENT OF ENVIRONMENTAL SERVICES
TRANSPORTATION DIVISION
1620 S.E. 190TH AVENUE
PORTLAND, OREGON 97233
(503) 248-5050

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

September 8, 1989

Board of County Commissioners
605 Courthouse
1021 SW Fourth Avenue
Portland, OR 97204

Subject: Conveyance of Various One (1) Foot Strips (Street Plugs) and Road
Fund Related Property Owned by Multnomah County to City of Portland
(Item 88-164)

Multnomah County owns various one (1) foot strips of land at the end of streets which were acquired as a condition of subdivision approval to insure the future extension of the street and road fund related property adjacent to former County roads previously surrendered to the City of Portland.

As a result of annexation to the city of Portland of areas which include these strips, the jurisdiction of the streets and adjacent property is the responsibility of the city.

Since the County no longer has any authority regarding the improvement of streets and/or land development approval for the area, it is the recommendation of this department that the Board of County Commissioners authorize the execution of the Bargain and Sale Deed, conveying the County's interest in those parcels to the city of Portland.

The purpose of this Bargain and Sale Deed and Order is to supersede that certain deed for road purposes and order authorized by the Board of County Commissioners on May 11, 1989, and recorded May 31, 1989, in Book 2207, Pages 2628 - 2648.

DO NOT RECORD executed deed, should be delivered to Paul Niles in the Right-of-Way Section of the City of Portland.

Very truly yours,

Paul Yarborough
Director

BP:vh

Encl. Order
 Bargain & Sale Deed
 Sketch

1274W

AN EQUAL OPPORTUNITY EMPLOYER

BARGAIN AND SALE DEED

KNOW ALL MEN BY THESE PRESENTS, that MULTNOMAH COUNTY, a political subdivision of the State of Oregon, hereinafter called grantor, for valuable considerations to it paid, does hereby grant, bargain, sell and convey unto the CITY OF PORTLAND, a municipal corporation of the State of Oregon, hereinafter called grantee, and grantee's heirs, successors and assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or appertaining situated in the County of Multnomah and the State of Oregon, described as follows to-wit:

Account
Numbers:

Parcels:

225600500

Tax Lot 5 of Blocks 3 and 4, EAST MT. TABOR, a recorded plat, recorded July 27, 1892, in Plat Book 176, Page 52 (on S.E. 103rd Drive and S.E. Cherry Blossom Drive), as follows:

All that portion of Blocks 3 and 4, EAST MT. TABOR, a recorded plat in Multnomah County, Oregon, lying between the easterly right-of-way line of S.E. Cherry Blossom Drive, County Road No. 3143 (said easterly right-of-way line lying 30.00 feet easterly, when measured at right angles, of the center line of said S.E. Cherry Blossom Drive), and the westerly right-of-way line of S.E. 103rd Drive, County Road No. 4020 (said westerly right-of-way line lying 30.00 feet westerly, when measured at right angles, of the centerline of said S.E. 103rd Drive), and lying southerly of the southerly right-of-way line of S.E. Morrison Court, County Road No. 4200 (said right-of-way line lying 30.00 feet southerly, when measured at right angles, of the centerline of S.E. Morrison Court), and including that part of vacated S.E. Morrison Street (vacated 8-4-69, County Order No. 4045), lying between said rights-of-way lines of S.E. Cherry Blossom Drive and S.E. 103rd Drive.

Containing 21,000 square feet more or less.

Account
Numbers:

Parcels:

564400020 Tract "B", METROPORT, a recorded plat recorded October 17, 1975, in Plat Book 1206, Page 1 (on N.E. Siskiyou Street, west of N.E. 108th Avenue).

569100010 Tract "A", Blocks 1 - 3, MIKULA-ELSASSER PARK, a recorded plat, recorded April 7, 1971, in Plat Book 1201, Page 98 (N.E. 55th Avenue, near N.E. Sumner Street).

942273570 Tax Lot 357, Section 27, T1N, R2E, W.M., (on N.E. Siskiyou Street, west of N.E. 108th Avenue), as follows:

A 1.00 foot wide non-access reserve strip being a portion of Tract 16 of the unrecorded plat of WINCHELL TRACTS, situated in the northeast one-quarter of the southwest one-quarter of the northwest one-quarter of Section 27, T1N, R2E, W.M., in the County of Multnomah and State of Oregon, being more particularly described as the most northerly 1.00 foot of the following described tract of land:

Commencing at a 5/8 inch diameter iron rod at the northeast corner of the duly recorded plat of ROSSMAN'S TERRACE, said corner being the northwest corner of Tract 17 of said WINCHELL TRACTS; thence N 89°49'30" E, along the north line thereof, a distance of 74.05 feet to the northwest corner of said Tract 16 and the point of beginning of the tract of land to be described; thence N 89°49'30" E along the north line of said Tract 16, a distance of 73.22 feet to the northeast corner thereof; thence S 0°30'30" W along the east line of said Tract 16, a distance of 25.00 feet to a point; thence S 89°49'30" W parallel with said north line of Tract 16, a distance of 73.34 feet to a point in the west line thereof; thence N 0°35'25" E along said west line, a distance of 25.00 feet to the point of beginning.

942344740 Tax Lot 474, Section 34, T1N, R2E, W.M., (on S.E. 102nd Avenue and S.E. 103rd Drive), as follows:

Account
Numbers:

Parcels:

Commencing at the southwest corner of Section 34, T1N, R2E, W.M., Multnomah County, Oregon, thence N 2°58'58" E along the centerline of S.E. 102nd Avenue No. 2696, a distance of 40.00 feet to a point on the north right-of-way line, extended westerly of S.E. Stark Street, No. 2702; thence S 87°53'32" E along said extended line, a distance of 40.00 feet, to a point on the east right-of-way line of S.E. 102nd Avenue, No. 2696; thence N 2°58'58" E along said right-of-way line, a distance of 134.85 feet to the point of beginning; thence continuing N 2°58'58" E along said line, a distance of 139.34 feet to a point on the westerly right-of-way line of S.E. 103rd Drive, No. 4020; thence southeasterly along said westerly right-of-way line on the arc of a 623.27 foot radius tangent curve to the left through a central angle of 8°41'32", an arc distance of 94.55 feet (the chord bears S 26°24'44" E, 94.46 feet) to a point of reverse curvature; thence continuing southeasterly along said westerly right-of-way line of S.E. 103rd Drive on the arc of a 563.27 foot radius tangent curve to the right through a central angle of 4°33'45", an arc distance of 44.85 feet (the chord bears S 28°14'38" E, 44.84 feet); thence southwesterly on the arc of a 48.00 foot radius non-tangent curve to the left through a central angle of 97°19'09", an arc distance of 81.53 feet (the chord bears S 77°56'57.5" E, 72.08 feet), to a point on the east right-of-way line of said S.E. 102nd Avenue, and the true point of beginning.

992030760

Tax Lot 76, Section 3, T1S, R2E, W.M., (on S.E. Washington Street near S.E. 106th Avenue), as follows:

A parcel of land situated in the northwest one-quarter of Section 3, T1S, R2E, W.M., Multnomah County, Oregon, more particularly described as follows:

All that portion of land lying between the south right-of-way line of S.E. Washington Street, No. 4022 and the following described line:

Beginning at a point on the south line of that tract of land conveyed to Richard J. Spenst, by deed recorded June 1, 1951, in Book 1479, Page 412, Deed Records of Multnomah County, Oregon, said point lying N 87°53'32" W, 17.37 feet from the southeast corner of said Spenst tract; thence N 87°53'32" W along the south line of said Spenst tract, a distance of 26.36 feet to a point on the south right-of-way line of said S.E. Washington Street, No. 4022.

Containing 436 square feet, more or less.

This deed is for the purpose of superseding that certain Deed for Road Purposes and Order authorized by the Board of County Commissioners on May 11, 1989, and recorded May 31, 1989, in Book 2207, Pages 2628 - 2648.

Dated this 21st day of December, 1989.

BOARD OF COUNTY COMMISSIONERS
MULTNOMAH COUNTY, OREGON

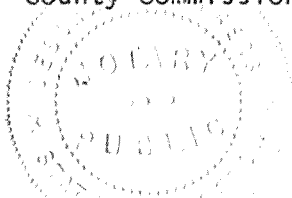
By: Gladys McCoy
GLADYS MCCOY, Chair

APPROVED:

Larry F. Nicholas
LARRY F. NICHOLAS, P.E.
County Engineer/Director

STATE OF Oregon, County of Multnomah

SIGNED BEFORE ME December 21, 1989, personally appeared Gladys McCoy, who being sworn, stated that she is the Chair of the Board of County Commissioners, Multnomah County, Oregon, and that this instrument was voluntarily signed in behalf of said County by authority of its Board of County Commissioners. Before me:



Deborah C. Rogers
Notary Public for Oregon

My Commission expires June 27, 19 93

REVIEWED:

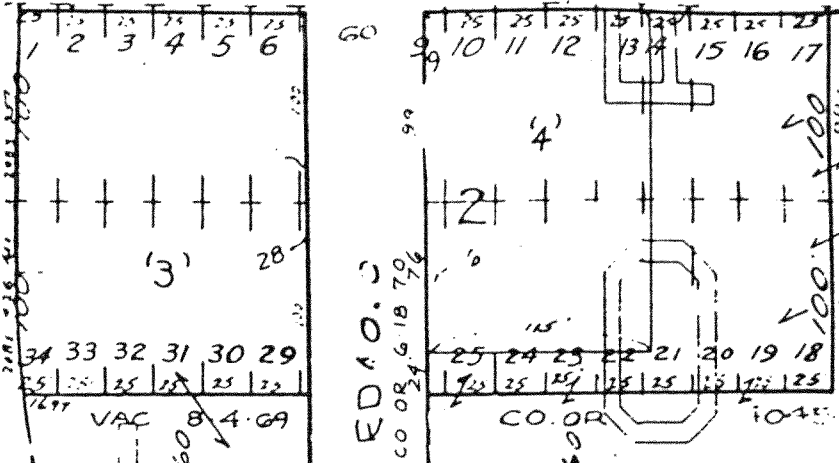
LAURENCE KRESSEL, COUNTY COUNSEL
For Multnomah County, Oregon

John L. Dubay
John L. Dubay
Assistant County Counsel

FD-3143 4764

34	33	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1
25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25

S.E. WASHINGTON ST WAS

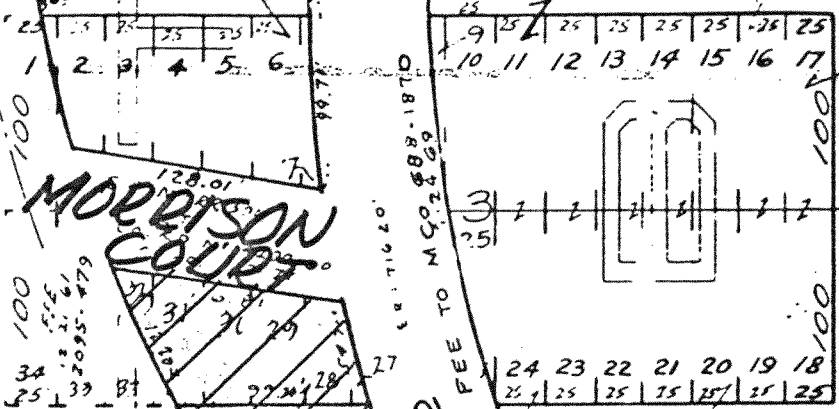


225600500

AVE

MORRISON COURT

22560-0500



258
10.58 A

(WEST AVE)

S.E. YAMHIL

BLOSSOM

(BROADWAY AVE) VAC 8409

180378

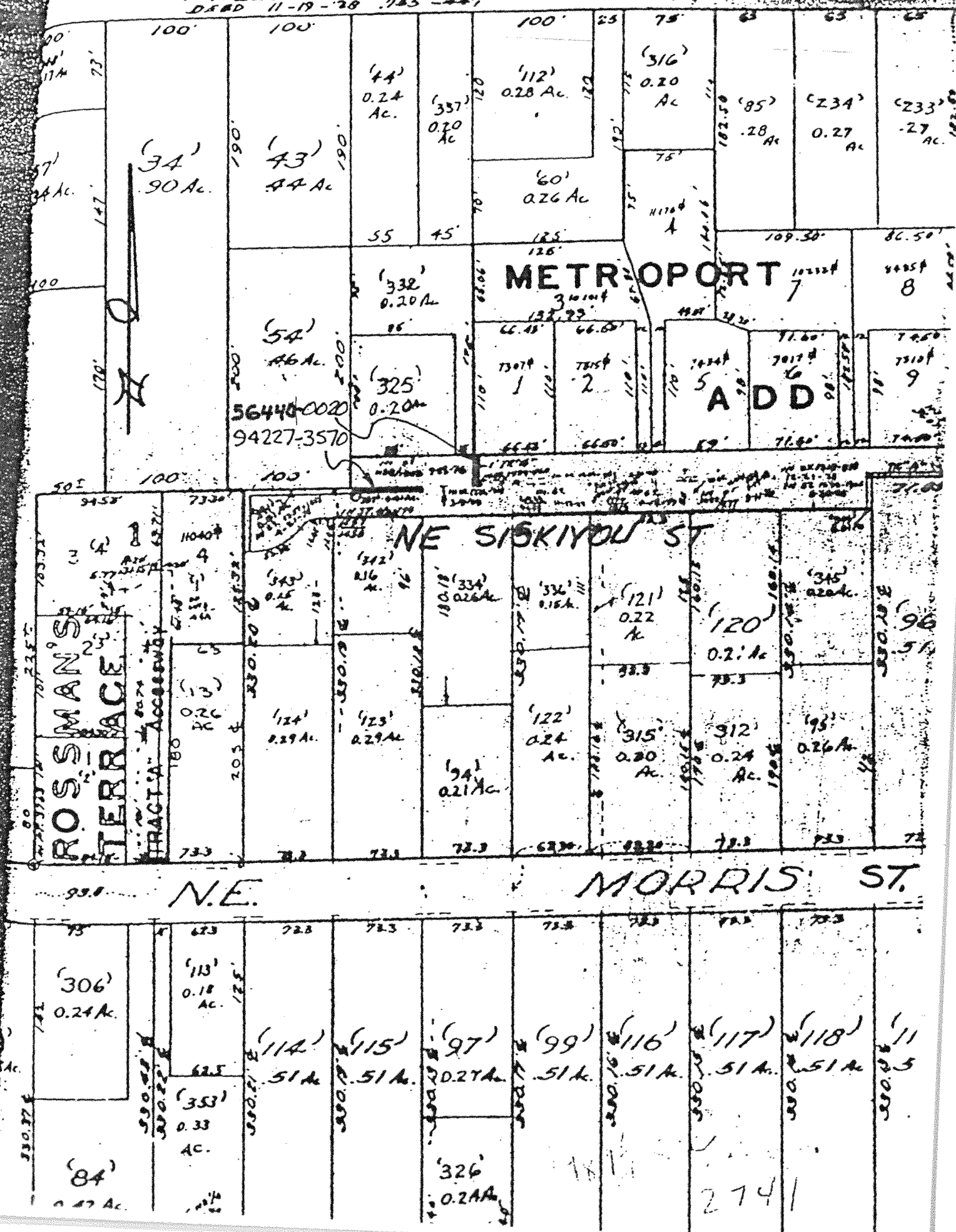
CHERRY

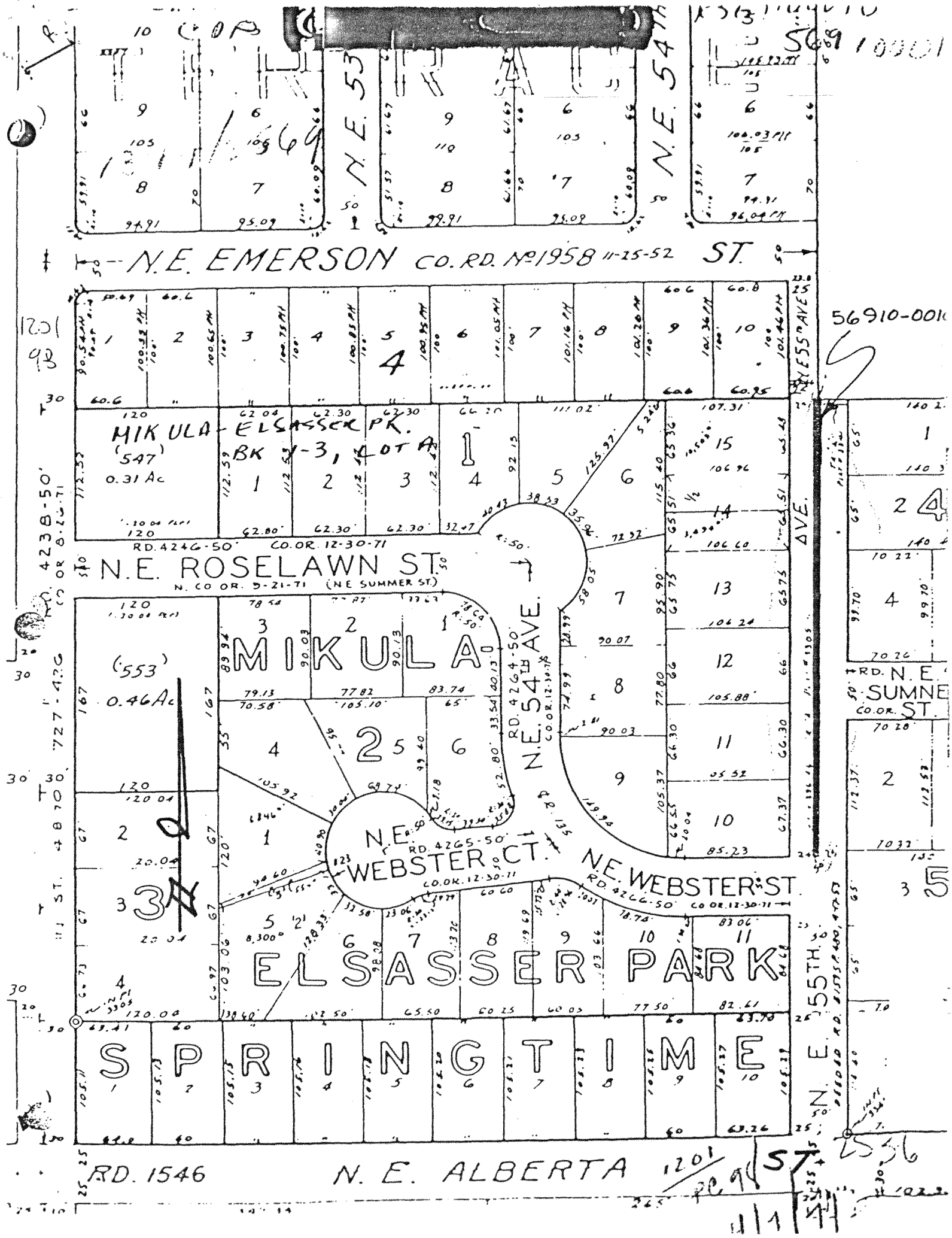
AVE.

II 9

3140

N.E.
DEAD 11-19-78 1155-447





102nd ST. (CR 10th AVE)

STA. 19+00.10
END RD. 4020

ST.

S.E. (RD. 1619-50)

RD. N. 4020

RD. 6.18.70

RD. 0.08.12.71

RD. 0.10.12.71

RD. 0.13.12.71

RD. 0.23.12.71

94234-4740

(121)
0.53 Ac.

(477)
0.57 Ac.

(479)
0.84 Ac.

(220)
0.50 Ac.

(335)
0.25 Ac.

(334)
0.25 Ac.

(218)
0.50 Ac.

(348)
0.25 Ac.

(920)
0.30 Ac.

(217)
0.45 Ac.

(122)
0.22 Ac.

(216)
0.22 Ac.

SE STARK

S.E.

ST

EAST TABOR

E. 103rd

DRIVE

E. 104TH AVE

105TH ST

U. E. 1087A

SE

STA. 38+00
END. RD. 2702-80
BEG. RD. 2774-80

N.E. COR.
BK 514 Pg 316
9-17-22

~~STARIK~~

\$

55-14-70

(259)
0.47 Ac.

163.25
(268)
0.26 Ac

(266)
0.44 Ac

(260)
2.30 Ac.

AV

80'
15 Ac

(81)
13 Ac.

(15)
0°
AC

260
7.39 Ac.

73.34
63' 003 Ac.

WASHINGTON
AVE

4022-62 ST

GT UN

SE

99203-0760

(276)
0.97 Ac.

(279)
1.85 Ac.

(70)
48 Ac

(82)
0.18 Ac
137.34

(83)
.19 Ac

(84)
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(85)
0.19 Ac

137. 35

901067

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419.46
60126

518.79

K. 529-A. 1722 & 1724

51935

1987

2,41

S.L

DATE SUBMITTED _____

(For Clerk's Use)
Meeting Date 12/21/89
Agenda No. R-9

REQUEST FOR PLACEMENT ON THE AGENDA

SUBJECT: Private Sale

Informal Only* _____ Formal Only _____

DEPARTMENT Environmental Services DIVISION Tax Title

CONTACT Larry Baxter TELEPHONE 248-3590

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Larry Baxter

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Request consideration of bids for purchase of the following tax foreclosed property by private sale as provided by ORS 275.200:

LOMA ACRES
EXC S 62' & EXC N 70' OF E 147' OF LOT 7

Acquired in November of 1986, this property is a landlocked parcel of unimproved land approximately 70 x 168 feet located north of 747 SE 148th Ave. The market value on the latest tax roll is \$4,700.00. The property is unbuildable under current zoning.

Request hearing date to be December 21, 1989 AT 9:30 AM, Room 602, Multnomah County Courthouse.

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA 5 minutes

IMPACT:

PERSONNEL

☒ FISCAL/BUDGETARY

☒ General Fund

Other Tax Title

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: Paul Yarbrough/bhw

BUDGET/PERSONNEL: _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) Paul Mackey

OTHER Jane Doe
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

1989 DEC 13 AM 9:09
CLERK OF COUNTY COMMISSIONER
MULTNOMAH COUNTY
OREGON

DATE SUBMITTED November 28, 1989

(For Clerk's Use)
Meeting Date 12/21/89
Agenda No. R-10

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: Chinook Landing Grant N.O.I.

Informal Only* _____
(Date)

Formal Only DECEMBER 14, 1989
(Date)

DEPARTMENT Environmental Services

DIVISION Parks Services

CONTACT Charles Ciecko/Dan Kromer

TELEPHONE 248-5050

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Charles Ciecko

BRIEF SUMMARY

Notice of Intent to apply for a \$300,000 grant from the Oregon Department of Fish and Wildlife. Money from this grant will be incorporated with grant money already received from the Oregon State Marine Board for construction of Chinook Landing Boating Facility on the Columbia River.

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA 15 minutes

IMPACT:

☐ PERSONNEL

☒ FISCAL/BUDGETARY

☐ General Fund

Other _____

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: cc. [Signature]

BUDGET/PERSONNEL /

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) [Signature]

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

3706V/2819p

1989 DEC 12 AM 10:15
CLERK OF
COUNTY COMMISSIONER
CLATSOP COUNTY
OREGON

APPENDIX A

DATE: November 28, 1989

TO: BOARD OF COUNTY COMMISSIONERS

DEPARTMENT AND CONTACT PERSON: Charles Ciecko/Dan Kromer, Parks Services Div.

GRANTOR AGENCY: Oregon Department of Fish and Wildlife

BEGINNING DATE OF GRANT: February 1, 1990

PROJECT TITLE: Chinook Landing Boating Facility

PROJECT DESCRIPTION/GOALS:

This grant proposal is for construction of a boater access facility on the Columbia River adjacent to Blue Lake Park. The Oregon Department of Fish and Wildlife believe this project will increase the accessibility onto the Columbia River for anglers, hunters and commercial gill netters whom this department represents. Construction dates will be from February 1, 1990 to October 1, 1991.

PROJECT ESTIMATED BUDGET	Direct/Indirect
FEDERAL SHARE:	\$ _____ / _____
STATE SHARE:	\$ <u>300,000</u> / _____
COUNTY SHARE:	\$ _____ / _____
TOTAL:	\$ <u>300,000</u> / _____

EXPLANATION OF LOCAL SHARE: (Explain indirect costs, hard-match, in-kind, etc.)

N/A

SPECIFY REPORTING AND/OR BILLING REQUIREMENTS OF GRANTOR AND WHO REPORTS
FINANCE _____ DEPARTMENT XX. IF DEPT. REPORTS, INDICATE
REASON.

GRANT DURATION AND FUTURE RATIO: (Indicate amount of county match per year.)

Grant duration 2/01/90 - 10/01/91

ADVANCE REQUESTED _____ YES _____ NO. IF NOT, INDICATE REASON.

N/A

RECEIPT OF FUNDS WILL BE DEPOSITED TO PO BOX _____ OR WIRED DIRECTLY _____.
IF NOT, INDICATE REASON.

0935p/2819p

(Use appropriate County
classification with yearly
costs.)

N/A

TOTAL

EXPLAIN MATERIALS AND SERVICES AND CAPITAL EXPENDITURES WITH TOTAL DOLLAR
AMOUNTS

N/A

COMMENTS

GRANT MANAGER

Signature

Date

BUDGET DIVISION

Signature

Date

FINANCE DIVISION

Signature

Date

PERSONNEL DIVISION

Signature

Date

DEPARTMENT DIRECTOR

cc.  12-4-89
Signature Date

0935p/2819p

(For Clerk's Use)

Meeting Date 12/21/89
Agenda No. R-11

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: Certificates of Participation (Mead Building)

Informal Only* _____
(Date)

Formal Only December 21, 1989
(Date)

DEPARTMENT General Services DIVISION Finance

CONTACT David Boyer/Patty Shaw TELEPHONE 248-3312

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD David Boyer/ Patty Shaw

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

In the matter of the approving of the issuance and negotiated sale of \$4,220,000 Series 1990A Certificates of Participation approving and authorizing the Certificate Purchase Agreement, the Lease-Purchase and Escrow Agreement, and the Preliminary Official Statement and Official Statment; and designating an Authorized Officer. Resolution of approving final sale will be presented for approval in January 1990.

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA 5-10 minutes

IMPACT:

PERSONNEL

☒ FISCAL/BUDGETARY

☐ General Fund

Lease Purchase payments have been approved in the 1989-90 budget.

Other _____

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: *John L. K. Wauder*

BUDGET / PERSONNEL *David C. Sharrin* /

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts)

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

DATE SUBMITTED December 11, 1989

(For Clerk's Use)

Meeting Date 12/21/89

Agenda No. R-11

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: Certificates of Participation (Mead Building)

Informal Only* _____
(Date)

Formal Only December 21, 1989
(Date)

DEPARTMENT General Services DIVISION Finance

CONTACT David Boyer/Patty Shaw TELEPHONE 248-3312

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD David-Boyer/Patty Shaw

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

In the matter of the approving of the issuance and negotiated sale of \$4,100,000 Series 1989B Certificates of Participation approving and authorizing the Certificate Purchase Agreement, the Lease-Purchase and Escrow Agreement, and the Preliminary Official Statement and Official Statement; and designating an Authorized Officer. Resolution of approving final sale will be presented for approval in January 1990.

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA 5-10 minutes

IMPACT:

PERSONNEL

☒ FISCAL/BUDGETARY

☐ General Fund Lease Purchase payments have been approved in the 1989-90 adopted budget.

Other _____

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: [Signature]

BUDGET / PERSONNEL David C. Sharron

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) [Signature]

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

BEFORE THE BOARD OF COUNTY COMMISSIONERS

MULTNOMAH COUNTY, OREGON

In the matter of the approving)
of the issuance and negotiated)
sale of \$4,100,000 Series 1989B)
Taxable Certificates of)
Participation; approving and)
authorizing the Certificate) RESOLUTION
Purchase Agreement, the Lease-)
Purchase and Escrow Agreement,) #89-
and the Preliminary Official)
Statement and Official Statement;)
and designating an Authorized)
Officer.)

WHEREAS, the Board of County Commissioners of Multnomah County, Oregon (the "Board") desires to acquire the land and building known as the Mead Building in Portland, Oregon and to make certain renovations and remodeling of the interior of the building for the purpose of housing the Counties' Aging Services Division and Social Services Division and such other agencies, divisions and departments of the County as may be located therein from time to time;

WHEREAS, the sellers of the Mead Building desire to close the purchase before December 28, 1989;

WHEREAS, the Board has reviewed a proposed plan to provide funds for the payment of the costs of such acquisition and renovation through the issuance of Taxable Certificates of Participation under a Lease-Purchase and Escrow Agreement to be entered into between Multnomah County (the "County") and a Vendor and Escrow Agent (the "Vendor" and "Escrow Agent") and the Board does determine that the proposed issuance of Certificates of Participation would be in the best interests of the County;

WHEREAS, the Board is advised that pursuant to the provisions of the Internal Revenue Code of 1986, as amended, and regulations promulgated thereunder, the County may not issue tax-exempt Certificates of Participation in that the Mead Building will continue to be leased and occupied by private activity tenants on the first floor of the building and by commercial tenants throughout the building during the remaining terms of their existing commercial leases. Therefore, it is proposed that the Certificates of Participation for the acquisition of the Mead Building and the renovation and remodeling thereof be issued as taxable obligations wherein the

interest component payable on the Certificates of Participation will be includable in the holder of the Certificates' gross income for federal income tax purposes;

WHEREAS, the Finance Director has negotiated documents for the issuance of the Certificates and has received from Kidder, Peabody & Co., Incorporated (the "Underwriter") a Certificate Purchase Contract for the purchase of the Certificates evidencing proportionate interests in the Lease-Purchase payments to be made by the County;

WHEREAS, the Board does find and determine that it is reasonable and necessary to approve and authorize the execution of the financing documents and being advised by the Finance Director that the documents are in final form and ready for approval and authorization;

THEREFORE BE IT RESOLVED THAT:

1. The Board does approve of the disbursement of funds from the Lease/Purchase Project Fund to purchase the Mead Building prior to the issuance of Certificates of Participation and the Lease/Purchase Project Fund shall be reimbursed from the proceeds of the sale of the Certificates of Participation.

2. The Board does approve of the Lease-Purchase financing of the acquisition and renovation of the Mead Building land and property (the "Facilities") as more fully described in the Series 1989B Lease-Purchase and Escrow Agreement (the "Agreement"), does approve of the Agreement, and does designate the Finance Director as the Authorized Officer to execute these documents for and on behalf of the County.

3. The County does accept the terms and provisions of the Series 1989B Certificate Purchase Contract (the "Purchase Contract") and does approve of the purchase price and interest rate to be borne by the Certificates and does authorize the Finance Director to execute the Purchase Contract on behalf of the County.

4. Pursuant to the authority of Oregon Revised Statutes 288.600 the Board does direct that the Series 1989B Certificates of Participation be issued and that the interest component of the Certificates shall be taxable for federal income tax purposes to the holders of the Certificates and the County does consent to such taxation of the interest component of the Certificates and does direct that the adoption of this Resolution and the execution thereof by the Chair of the Board shall constitute written consent as provided by law.

5. The County does approve of the issuance of the Series 1989B Certificates in fully registered form, in denominations of Five Thousand Dollars (\$5,000) each or integral multiples thereof, to be dated January 15, 1990 and to be numbered sequentially beginning with R-1 and shall mature serially on the 15th day of January of each year as follows:

<u>Year</u>	<u>Principal Component Amount</u>	<u>Interest Rate Component</u>
-------------	---	--

The Certificates shall bear interest payable semi-annually on the 15th day of July and the 15th day of January of each year commencing July 15, 1990. Interest shall be calculated on the basis of a 30-day month, 360-day year and shall be payable by check or draft mailed on the interest payment date to the Certificate owners whose names appear on the registration books of the County maintained by the Paying Agent as of the close of business on the first day of the month wherein an interest payment is due.

The County may elect to redeem the Certificates maturing after January 15, _____ in whole or in part, and if in part, in inverse order of maturity, and by lot within a single maturity and in such amounts that equal \$5,000 or any integral multiple thereof, on any interest payment date on or after January 15, _____ at a price equal to the principal component of the Certificates to be redeemed plus the interest component accrued to the redemption date.

In addition, the Certificates are redeemable, if, in the opinion of the County, the Facilities suffer substantial damage or destruction to the extent it cannot be reasonably used for its intended purposes or in the event of prepayment of the Lease Payments upon the deposit by the County with the Escrow Agent of sufficient cash or government obligations to prepay the outstanding Lease Payments.

Notice of such redemption will be given by first class mail, postage prepaid, at least thirty (30) days but not more than sixty (60) days prior to the date fixed for redemption to

the owners of the Certificates to be redeemed at the addresses of such owners as shown on the Certificate Register.

6. The County may, but is not obligated to, take such action as is necessary to budget and appropriate expenditures sufficient to pay Lease Payments for each fiscal year in the amount of the annual principal component maturities and the accruing interest components on the outstanding Certificates. In the event of appropriation of funds for Lease Payments the County covenants to maintain such appropriation in full force and effect during that fiscal year and shall expend such appropriated funds only for Lease Payments. In the event the County determines not to appropriate funds sufficient for Lease Payments in any fiscal year, such failure shall constitute a termination under the terms of the Agreement and the Escrow Agent may exercise such remedies as are provided in the Agreement.

7. The Board does authorize the establishment of certain trust accounts as provided in the Agreement including the "Multnomah County, Oregon Series 1989B Office Facilities Reserve Account". There shall be deposited at close of the sale of the Certificates to the Reserve Account moneys to be held in trust as a reserve for the payment of Lease Payments pursuant to the Agreement. In the event of the failure to appropriate funds in any fiscal year for the Lease Payments or the insufficiency of funds appropriated and available for the Lease Payments, the Escrow Agent is authorized to transfer from the Reserve Account such moneys, until the Reserve Account is exhausted, in sufficient amount to make up any deficiency in the amount of the Lease Payments due during the ensuing fiscal year. Funds in the Reserve Account shall be applied only upon Lease Payments including unappropriated Lease Payments.

8. The Certificates shall be secured by a pledge and covenant of the County to apply appropriated funds from the general funds of the County upon the Lease Payments and to secure the Lease Payments by funds in the Reserve Account.

9. The County does designate and appoint Security Pacific Bank Oregon as the Vendor, Escrow Agent and Paying Agent and Registrar for the Certificates and does request the Paying Agent and Registrar to authenticate the Certificates as of the date of delivery of the purchasers thereof.

10. The County does approve of the preparation and distribution of the Preliminary Official Statement, does ratify the distribution thereof to prospective purchasers of the Certificates and does authorize the preparation and distribution of the Official Statement. When the Authorized Officer has been advised that the final Official Statement does not contain any

untrue statement of a material fact or omit to state any material fact necessary to make the statements contained in the Official Statement not misleading in the light of the circumstances under which they are made, then the Authorized Officer may certify the accuracy of the Official Statement on behalf of the County.

11. The County does authorize the Authorized Officer of the County to execute such other and necessary documents as are proper to consummate the financing.

ADOPTED this ____ day of December, 1989.

BOARD OF COUNTY COMMISSIONERS
MULTNOMAH COUNTY, OREGON

By _____
Multnomah County Chair

(SEAL)

Reviewed by:

LAURENCE KRESSEL
County Counsel for
Multnomah County, Oregon

By  _____
County Counsel

BUDGET MODIFICATION NO. DGS #8(For Clerk's Use) Meeting Date 12/21/89Agenda No. R-121. REQUEST FOR PLACEMENT ON THE AGENDA FOR December 14, 1989

(Date)

DEPARTMENT General ServicesDIVISION Assessment & TaxationCONTACT Kathy TunebergTELEPHONE 248-3330*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Kathy TunebergSUGGESTEDAGENDA TITLE (to assist in preparing a description for the printed agenda)

Reestablish on Finance Specialist 1 position in A & T Tax Collection/Information Section.

(Estimated Time Needed on the Agenda)

2. DESCRIPTION OF MODIFICATION (Explain the changes this Bud Mod makes. What budget does it increase? What do the changes accomplish? Where does the money come from? What budget is reduced? Attach additional information if you need more space.)
- ☒ PERSONNEL CHANGES ARE SHOWN IN DETAIL ON THE ATTACHED SHEET

This budget modification will replace one Finance Specialist 1 position in Tax Collection from January 1 through June 30, 1990.

DGS #5 moved funds from the vacant Finance Specialist 1 position to add an Administrative Specialist 1 position in Technical Support, with the understanding that the Finance Specialist 1 position would be reinstated at a later date.

Funding for this position will be offset by revenue the County will receive from HB 2338. The County retains 5% of the now \$20 real estate conveyance fee.

3. REVENUE IMPACT (Explain revenues being changed and the reason for the change)

4. CONTINGENCY STATUS (to be completed by Finance/Budget)

General Fund Contingency before this modification (as of 12/6)\$ 2,780,531

(Specify Fund)

(Date)

After this modification

\$

Originated By	Date	Department Manager	Date
<i>Janice Druce</i>	<u>12-7-89</u>	<i>A. Alexander</i>	<u>12-7-89</u>
Budget Analyst	Date	Personnel Analyst	Date
<i>Depl Mark Campbell</i>	<u>12-7-89</u>	<i>Donald H. Winkley</i>	<u>12-7-89</u>
Board Approval		Date	
<i>Pauline Anderson</i>		<u>12/21/89</u>	

PERSONNEL DETAIL FOR BUD MOD NO. DGS #8

5. ANNUALIZED PERSONNEL CHANGES (Compute on a full year basis even though this action affects only a part of the fiscal year.)

FTE Increase (Decrease)	POSITION TITLE	A n n u a l i z e d			
		BASE PAY Increase (Decrease)	Increase (Decrease) Fringe	Ins.	TOTAL Increase (Decrease)
1.00	Finance Specialist 1	27,123	6,851	3,547	37,521
	TOTAL CHANGE (ANNUALIZED)				

6. CURRENT YEAR PERSONNEL DOLLAR CHANGES (calculate costs or savings that will take place within this fiscal year; these should explain the actual dollar amounts being changed by this Bud Mod.)

Permanent Positions, Temporary, Overtime, or Premium	Explanation of Change	C u r r e n t F Y			
		BASE PAY Increase (Decrease)	Increase (Decrease) Fringe	Ins.	TOTAL Increase (Decrease)
.50 FTE Finance Specialist 1	To replace position transferred by DGS #5	13,093	3,307	3,243	19,643

EXPENDITURE

TRANSACTION EB []

GM [] TRANSACTION DATE _____

ACCOUNTING PERIOD _____

BUDGET FY _____

Document Number	Action	Fund	Agency	Organi- zation	Reporting Activity	Category	Object	Current Amount	Revised Amount	Change Increase (Decrease)	Sub- Total	Description
		100	040	7630			5100	546,456		13,093		
							5500	144,481		3,307		
							5550	83,830		3,243		
		400	040	7531			6520	3,531,231		3,243		
		100	045	9120			7700	2,780,531		19,643		
////////////////////////////////////												
TOTAL EXPENDITURE CHANGE////////////////////////////////////												TOTAL EXPENDITURE CHANGE

REVENUE

TRANSACTION RB []

GM [] TRANSACTION DATE _____

ACCOUNTING PERIOD _____

BUDGET FY _____

Document Number	Action	Fund	Agency	Organi- zation	Reporting Activity	Category	Revenue Source	Current Amount	Revised Amount	Change Increase (Decrease)	Sub- Total	Description
		400	040	7040			6600	4,102,683		3,243		
////////////////////////////////////												
TOTAL REVENUE CHANGE////////////////////////////////////												TOTAL REVENUE CHANGE

REQUEST FOR GENERAL FUND CONTINGENCY TRANSFER

1. Attachment to Bud Mod No. DGS #8 2. Amount requested from General Fund Contingency: \$ 19,643

3. Summary of request:

Request will replace a Finance Specialist position in the Tax Collection/Information Section of A & T. This position was budgeted and moved to Technical Support by DGS #5.

4. Has the expenditure for which this transfer is sought been included in any budget request during the past five years? yes If so, when? FY 1989-90
If so, what were the circumstances of its denial?

5. Why was this expenditure not included in the annual budget process?

6. What efforts have been made to identify funds from another source within the Department, to cover this expenditure? Why are no other Departmental sources of funds available?

7. Describe any new revenue that this expenditure will produce, any cost savings that will result, and any anticipated payback to the contingency account.

Revenue to offset the cost of this position will come to the County in the form of a 5% Administrative fee collected on the newly implemented Real Estate conveyance fee.

8. This request is for a (Quarterly _____, Emergency _____) review.

9. FOR EMERGENCY REQUESTS ONLY: Describe in detail on an additional sheet the costs or risks that would be incurred by waiting for the next quarterly review, in justification of the emergency nature of this request.

10. Attach any additional information or comments you feel helpful.

Signature of Department Head/Elected Official

Date

REQUEST TO CREATE/RECLASSIFY A POSITION

1. List the proposed duties of the position (please do not copy from the class specification):

- a. Performs professional accounting work and assists Tax Accounting Supervisor with fiscal management and systems analysis and design in A&T Tax Accounting.
- b. Prepares accounting transactions, journal entries.
Prepares tax turnovers and maintain turnover and distribution systems.
Prepares monthly and annual reconciliations as well as internal management reports.
- c. Assists with year-end reporting, analysis, schedule preparation and works with outside auditors.

Assists in development of policy procedures and assists in maintenance of financial controls.
- d. Provides technical assistance where needed and serves as back-up to the Tax Accounting Supervisor.

Use the reverse side or attach additional sheets, if needed.

2. State the proposed classification title:

Financial Specialist I

3. Is this a new position? ☐ YES ☒ NO

4. If this is an existing position, state the name of the incumbent:

5. Proposed effective date of change: January 1, 1990

Hiring Manager: Kathy Tuneberg

Date: November 20, 1989 Dept/Div: DGS/Assessment & Taxation

EMPLOYEE RELATIONS DIVISION USE ONLY

Action: ☒ Approved as submitted

☐ Approved for classification title

☐ Denied (for Reclassification Requests only)

Analyst Name

Donald Herlihy

Date

11/29/89

BUDGET MODIFICATION NO. DGS #9(For Clerk's Use) Meeting Date 12/21/89
Agenda No. R-131. REQUEST FOR PLACEMENT ON THE AGENDA FOR 12/21/89

(Date)

DEPARTMENT General ServicesDIVISION Information ServicesCONTACT Jim MunzTELEPHONE 248-3749*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Jim MunzSUGGESTEDAGENDA TITLE (to assist in preparing a description for the printed agenda)

Transfer from Data Processing Fund contingency

(Estimated Time Needed on the Agenda)

2. DESCRIPTION OF MODIFICATION (Explain the changes this Bud Mod makes. What budget does it increase? What do the changes accomplish? Where does the money come from? What budget is reduced? Attach additional information if you need more space.)
[] PERSONNEL CHANGES ARE SHOWN IN DETAIL ON THE ATTACHED SHEET

This budget modification requests a transfer of \$200,000 from the DP Fund contingency for the purchase of an upgrade to the County's existing Central Processing Unit (CPU).

BOARD OF
COUNTY COMMISSIONERS
1989 DEC 13 AM 10:03
MULTICOUNTY
OREGON

3. REVENUE IMPACT (Explain revenues being changed and the reason for the change)

4. CONTINGENCY STATUS (to be completed by Finance/Budget)

Data Processing Contingency before this modification (as of 12/7/89)
(Specify Fund) (Date)

\$ 322,457

After this modification

\$ 122,457

Originated By	Date	Department Manager	Date
Budget Analyst	Date	Personnel Analyst	Date
<u>J. Mark Campbell</u>	<u>12-11-89</u>	<u>Brenda Alexander</u>	<u>Pauline Anderson</u>
Board Approval			Date
<u>REBORAH CROOKS</u>			<u>December 21, 1989</u>

TRANSACTION EB []

GM []

TRANSACTION DATE_

ACCOUNTING PERIOD

BUDGET FY_

Change

Document Number	Action	Fund	Agency	Organi- zation	Activity	Reporting Category	Object	Current Amount	Revised Amount	Increase (Decrease)	Sub- Total	Description
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TOTAL EXPENDITURE CHANGE										TOTAL EXPENDITURE CHANGE									
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REVENUE

TRANSACTION RB []

GM []

TRANSACTION DATE_

ACCOUNTING PERIOD

BUDGET FY_

Change

Document Number	Action	Fund	Agency	Organi- zation	Activity	Reporting Category	Revenue Source	Current Amount	Revised Amount	Increase (Decrease)	Sub- Total	Description
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[illegible]

TOTAL REVENUE CHANGE

TOTAL REVENUE CHANGE	
----------------------	--

DATE SUBMITTED _____

(For Clerk's Use)
Meeting Date 12/21/89
Agenda No. R-14

REQUEST FOR PLACEMENT ON THE AGENDA
RATIFICATION OF
Subject: INTERGOVERNMENTAL AGREEMENT

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Human Services DIVISION Health

CONTACT Kathy Page TELEPHONE 248-3976

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Duane Zussy/Scott Clement

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Request ratification of a cooperative Intergovernmental Agreement with the 6255th United States Army Reserve Dental Service Detachment whereby reserve personnel will provide dental service to County prisoners at Corrections Health Clinic for the period upon execution until 90 day's notice.

A copy of the original contract is with the Clerk of the Board.
(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ RATIFICATION

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA _____

IMPACT:

PERSONNEL

RETURNED TO
KATHY PAGE 12/20/89

NO PERSONNEL OR BUDGET IMPACT

☐ FISCAL/BUDGETARY

☐ GENERAL FUND

OTHER _____

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: Duane Zussy (DC)

BUDGET / PERSONNEL: _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) [Signature]

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

CLERK OF
COUNTY COMMISSIONER
1989 DEC 12 AM 10:16
JUNIOR COUNTY
OREGON



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

MULTNOMAH COUNTY OREGON

Contract # 102860

Amendment # _____

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000 <input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement R-14 12/21/89

Contact Person Kennedy Phone 3674 Date 29 NOV 89

Department Human Services Division Health Bldg/Room 160/8

Description of Contract The Army Reserve provides dentists on weekends to provide emergency extractions, temporary fillings and infection treatment. These weekend clinics supplement County's Tuesday and Thursday Dental Clinics.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name 6255TH U.S.A.R. Dental Service Detachment

Mailing Address 5119 Portland Ave.
Tacoma, WA 98404

Phone _____

Employer ID # or SS # N/A

Effective Date Upon Execution

Termination Date 90 Day Notice

Original Contract Amount \$ -0-

Amount of Amendment \$ -0-

Total Amount of Agreement \$ -0-

Payment Term

☐ Lump Sum \$ _____

☐ Monthly \$ _____

☐ Other \$ _____

☐ Requirements contract - Requisition required.

Purchase Order No. _____

☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager Diane Truacy (sc)

Date 12/6/89

Purchasing Director
(Class II Contracts Only)

Date _____

County Counsel

Date 12/21/89

County Chair/Sheriff

Date 12/21/89

VENDOR CODE			VENDOR NAME						TOTAL AMOUNT		\$	
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC	IND
01.	100	010	0951							-0-		
02.												
03.												

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
HEALTH DIVISION
426 S.W. STARK STREET, 8TH FLOOR
PORTLAND, OREGON 97204
(503) 248-3674
FAX (503) 248-3676

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Gladys McCoy
Multnomah County Chair

VIA: Duane Zussy, Director *Duane Zussy (PC)*
Department of Human Services

FROM: *Bill* Bill Odegaard, Director
Health Division

DATE: November 29, 1989

SUBJECT: Intergovernmental Agreement with U.S. Army Reserve 6255th Dental Service Detachment

Recommendation: The Health Division and the Department of Human Services recommend County Chair approval and County Board ratification of this intergovernmental agreement with the U.S. Army Reserve 6255th Dental Service Detachment for the period upon execution to 90 days written notice.

Analysis: This intergovernmental agreement which we just received formalizes a 1981 verbal agreement between the dental detachment and the Multnomah County Detention Center Health Clinic. The dental reservists perform emergency extractions, temporary fillings and infections treatment approximately three (3) weekends per month at the Health Clinic. The number of patients served per weekend ranges between 15 to 30. The Army provides the cost of professional services.

Background: The County conducts dental clinics on Tuesday and Thursday of each week. Therefore, the weekend patients are those persons who: have a dental emergency after the Thursday clinic, were not able to be scheduled for the Thursday clinic, or require follow-up care from the week. The County provides the cost of dental supplies and a dental technician. The reserve dental clinic is highly successful. The County was recently the recipient of a NACO (National Association of Counties) award for the clinic operation.

[6143K-p]

4

DEPARTMENT OF THE ARMY
6255th U.S.A.R. DENTAL SERVICE DETACHMENT
5119 Portland Avenue
Tacoma, WA 98404

Memorandum of Clinical Affiliation Agreement for Training for Dental Personnel in the United States Army Reserve.

Parties: (1) Multnomah County Department of Human Services, Health Services Division (hereafter referred to as COUNTY)

(2) 6255th U.S.A.R. Dental Service Detachment, 5119 Portland Avenue, Tacoma, WA 98404 (hereafter referred to as the RESERVE UNIT)

1. It is agreed by COUNTY and RESERVE UNIT that it is of mutual interest to cooperate in a plan to furnish clinical experience for U.S. Army Reservists (RESERVISTS) in Multnomah County Detention Center (MCDC). Emergency and Interceptive patient care is the RESERVE UNIT's first priority. Care is patient-oriented with no intent to meet teaching-learning goals if these jeopardize the patient. The second priority of care is preventive oriented.

2. RESERVE UNIT will assign RESERVISTS with identifiable education and experiential skills to provide care to patients agreed upon by RESERVE UNIT and COUNTY. RESERVISTS' assignments by RESERVE UNIT are made depending upon each RESERVIST'S level of skill, knowledge, and understanding.

3. RESERVE UNIT will assign professional staff to be responsible for supervising and coordinating the activities of RESERVISTS. RESERVE UNIT staff in charge will report to the appropriate COUNTY supervisor to coordinate patient care assignments and other matters as necessary.

4. COUNTY will assign dental auxiliaries as necessary to meet the goals of this program.

5. COUNTY will provide operating equipment and supplies to carry out this program.

6. RESERVE UNIT will ensure that all appropriate COUNTY policies and procedures are adhered to by all RESERVISTS.

7. RESERVE UNIT will assign professional staff to serve as instructors, when necessary, at the ratio of one instructor for each ten (10) paraprofessionals each time they are at MCDC.

8. A schedule of RESERVE UNIT drill days and duty assignment hours will be provided to COUNTY 12 months in advance and will be updated quarterly as required by COUNTY and approved by Commander of RESERVE UNIT.

9. COUNTY will be responsible for the actions its personnel and RESERVE UNIT will be responsible for the actions of its personnel.

10. There will be no monetary exchange between COUNTY and RESERVE UNIT.

11. RESERVISTS on duty at COUNTY are governed by existing military regulations affording protection to RESERVISTS in event of accident or injury.

12. This Agreement will be effective upon the date of execution by the parties, and may be terminated by either party without cause upon 90 days written notice to the other party.

13. Any modification of the provisions of this Agreement shall be reduced to writing and signed by the parties.

14. This Agreement contains the entire agreement between the parties and supersedes all prior written or oral discussions or agreements.

RATIFIED

Multnomah County Board of Commissioners

MULTNOMAH COUNTY, OREGON

By

Gladys McCoy
County Chair, Gladys McCoy

Date

12/31/89

6255th U.S.A.R. DENTAL SERVICE DETACHMENT

By

James S. Lingle Col. D.E.

Date

26 July 1989

REVIEWED:

LAURENCE KRESSEL

County Counsel for

Multnomah County, Oregon

By

[Signature]
Deputy County Counsel

Date

12.7.89

HEALTH DIVISION

By:

Billi Odgaard
Billi Odgaard, Director

Date:

Nov 24, 1989

By:

Kathy Page
Program Manager

Date:

Nov 14, 1989



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

MULTNOMAH COUNTY OREGON

Contract # 102860

Amendment # _____

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement R-14 12/21/89

Contact Person Kennedy Phone 3674 Date 29 NOV 89

Department Human Services Division Health Bldg/Room 160/8

Description of Contract The Army Reserve provides dentists on weekends to provide emergency extractions, temporary fillings and infection treatment. These weekend clinics supplement County's Tuesday and Thursday Dental Clinics.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name 6255TH U.S.A.R. Dental Service Detachment
Mailing Address 5119 Portland Ave.
Tacoma, WA 98404

Phone _____

Employer ID # or SS # N/A

Effective Date Upon Execution

Termination Date 90 Day Notice

Original Contract Amount \$ -0-

Amount of Amendment \$ -0-

Total Amount of Agreement \$ -0-

Payment Term

- ☐ Lump Sum \$ _____
☐ Monthly \$ _____
☐ Other \$ _____
☐ Requirements contract - Requisition required.
Purchase Order No. _____
☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager Dwaine Truog (PC)

Purchasing Director
(Class II Contracts Only)

County Counsel [Signature]

County Chair/Sheriff [Signature]

Date 12/6/89

Date [Signature]

Date 12/22/89

Date 12/21/89

VENDOR CODE			VENDOR NAME						TOTAL AMOUNT \$		
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	100	010	0951							-0-	
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/BID** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT - Requisition Required** - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
23. **LGFS DESCRIPTION** - Abbreviated description for Data Entry purposes.
24. **AMOUNT** - If total dollar amount is being split among different account numbers, indicate dollar amounts here.

4

DEPARTMENT OF THE ARMY
6255th U.S.A.R. DENTAL SERVICE DETACHMENT
5119 Portland Avenue
Tacoma, WA 98404

Memorandum of Clinical Affiliation Agreement for Training for Dental Personnel in the United States Army Reserve.

Parties: (1) Multnomah County Department of Human Services, Health Services Division (hereafter referred to as COUNTY)

(2) 6255th U.S.A.R. Dental Service Detachment, 5119 Portland Avenue, Tacoma, WA 98404 (hereafter referred to as the RESERVE UNIT)

1. It is agreed by COUNTY and RESERVE UNIT that it is of mutual interest to cooperate in a plan to furnish clinical experience for U.S. Army Reservists (RESERVISTS) in Multnomah County Detention Center (MCDC). Emergency and Interceptive patient care is the RESERVE UNIT's first priority. Care is patient-oriented with no intent to meet teaching-learning goals if these jeopardize the patient. The second priority of care is preventive oriented.

2. RESERVE UNIT will assign RESERVISTS with identifiable education and experiential skills to provide care to patients agreed upon by RESERVE UNIT and COUNTY. RESERVISTS' assignments by RESERVE UNIT are made depending upon each RESERVIST'S level of skill, knowledge, and understanding.

3. RESERVE UNIT will assign professional staff to be responsible for supervising and coordinating the activities of RESERVISTS. RESERVE UNIT staff in charge will report to the appropriate COUNTY supervisor to coordinate patient care assignments and other matters as necessary.

4. COUNTY will assign dental auxiliaries as necessary to meet the goals of this program.

5. COUNTY will provide operating equipment and supplies to carry out this program.

6. RESERVE UNIT will ensure that all appropriate COUNTY policies and procedures are adhered to by all RESERVISTS.

7. RESERVE UNIT will assign professional staff to serve as instructors, when necessary, at the ratio of one instructor for each ten (10) paraprofessionals each time they are at MCDC.

8. A schedule of RESERVE UNIT drill days and duty assignment hours will be provided to COUNTY 12 months in advance and will be updated quarterly as required by COUNTY and approved by Commander of RESERVE UNIT.

9. COUNTY will be responsible for the actions its personnel and RESERVE UNIT will be responsible for the actions of its personnel.

10. There will be no monetary exchange between COUNTY and RESERVE UNIT.
11. RESERVISTS on duty at COUNTY are governed by existing military regulations affording protection to RESERVISTS in event of accident or injury.
12. This Agreement will be effective upon the date of execution by the parties, and may be terminated by either party without cause upon 90 days written notice to the other party.
13. Any modification of the provisions of this Agreement shall be reduced to writing and signed by the parties.
14. This Agreement contains the entire agreement between the parties and supersedes all prior written or oral discussions or agreements.

RATIFIED

Multnomah County Board of Commissioners

MULTNOMAH COUNTY, OREGON

By

Gladys McCoy
County Chair, Gladys McCoy

Date

12/21/89

6255th U.S.A.R. DENTAL SERVICE DETACHMENT

By

James H. Luggie Col DC

Date

26 July 1989

REVIEWED:

LAURENCE KRESSEL
County Counsel for
Multnomah County, Oregon

By

Laurence Kessel
Deputy County Counsel

Date

12.7.89

HEALTH DIVISION

By:

Billi Odegaard
Billi Odegaard, Director

Date:

Nov 24, 1989

By:

Kathy Page
Program Manager

Date:

Nov 14, 1989

DATE SUBMITTED _____

(For Clerk's Use)

Meeting Date 12/21/89

Agenda No. R-15

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: Ratification of IGA

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Human Services

DIVISION Social Services

CONTACT Susan Clark

TELEPHONE 248-3691

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD _____

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Ratification of an IGA contract amendment between Tri-Met and Developmental Disabilities Program Office. Tri-Met will bill DD on a fee for service basis, as required. Allows Tri-Met to provide transportation services for Multnomah County residents only (previously served Clackamas, Multnomah and Washington counties).

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☐ RATIFICATION

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA _____

IMPACT:

PERSONNEL

☒ FISCAL/BUDGETARY Org. 1246-Requirements

☐ - General Fund

Other State/Federal

*originals
Sent to Susan Clark
12/26/89*

BOARD OF
COUNTY COMMISSIONERS
MULTNOMAH COUNTY
OREGON
1989 DEC 12 AM 10:16

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: Duane Hussy (DC)

BUDGET / PERSONNEL /

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) [Signature]

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM
 (See instructions on reverse side)

DKS #102-1 - FY 89-90

TYPE I

- ☐ Professional Services under \$10,000
☐ Revenue
☐ Grant Funding
☒ Intergovernmental Agreement

 Amendment # 1 to Contract # 101020

TYPE II

- ☐ Professional Services over \$10,000 (RFP, Exemption)
☐ PCRB Contract
☐ Maintenance Agreement
☐ Licensing Agreement
☐ Construction

Amendment # _____ to Contract # _____

 Contact Person Susan Clark Phone 248-3691 Date 11/15/89

 Department Human Services Division Social Services Bldg/Room 160/6

 Description of Contract Revision of Employment Transportation Special Conditions allowing payment for rides for Multnomah County residents only, as authorized by the Vocational Program Development Specialist. Payment made monthly upon submission of billing.

 RFP/BID # Exempt-IGA Date of RFP/BID _____ Exemption Exp. Date _____

 ORS/AR # _____ Contractor is ☐ MBE ☐ FBE ☐ QRF

Contractor Name Tri-Met
 Mailing Address 4012 SE 17th Ave.
Portland, OR 97202
 Phone 238-4879
 Employer ID# or SS# 93-0579353
 Effective Date July 1, 1989
 Termination Date June 30, 1990
 Original Contract Amount \$ Requirements
 Amount of Amendment \$ _____
 Total Amount of Agreement \$ Requirements

Payment Terms

- ☐ Lump Sum \$ _____
☐ Monthly \$ _____
☒ Other \$ Fee for services.

☐ Requirements contract-requisition required
 Purchase Order No. _____

Required Signatures:

 Department Head Duane Zussy (DC)

 Date 11/21/89

 Purchasing Director
 (Type II Contracts Only)

Date _____

 County Counsel [Signature]

 Date 11-29-89

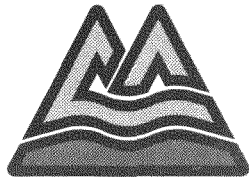
Budget Office _____

Date _____

County Executive/Sheriff _____

Date _____

TRANSACTION CODE	P.O.	AGENCY	PO DATE	m m d d y y	ACCOUNTING PERIOD	m m y y	BUDGET FY	y y	ACTION		
VENDOR CODE		VENDOR NAME				TOTAL AMOUNT		\$	<input type="checkbox"/> Original Entry (E) <input type="checkbox"/> Adjustment (M)		
LINE NO.	CONTRACT NUMBER	FUND	AGENCY	ORGANIZATION	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	DESCRIPTION	AMOUNT	INC/DEC IND
	101020-1	156	010	1246	DD53	6060		1253		\$ Requirements.	
										\$	
										\$	
										\$	



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
SOCIAL AND FAMILY SERVICES DIVISION
ADMINISTRATIVE OFFICES
426 S.W. STARK ST., 6TH FLOOR
PORTLAND, OREGON 97204
(503) 248-3691

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Gladys McCoy
Multnomah County Chair

VIA: Duane Zussy *Duane Zussy (pc)*
Director, Department of Human Services

FROM: Gary Smith *GS*
Director, Social Services

DATE: November 15, 1989

SUBJECT: Recommendation to Approve Tri-Met Amendment #1

RETROACTIVE STATUS: The term of this contract is July 1, 1989 to June 30, 1990. It is necessary to have this retroactive date due to a revision of the services providing rides for Developmental Disability clients in the original contract for fiscal year 89/90.

RECOMMENDATION: Social Services Division recommends Chair approval of a contract between the Developmental Disabilities Program and Tri-Met for the period July 1, 1989 through June 30, 1990.

ANALYSIS: Employment Transportation Special Conditions (DD53) is revised allowing payment for rides for Multnomah County residents only, as authorized by the Vocational Program Development Specialist. Payment is made monthly upon submission of billing by Tri-Met. Funding is appropriated in the current Developmental Disabilities Program budget.

BACKGROUND: Tri-Met has been a long term provider of transportation services for Multnomah, Clackamas and Washington Counties. This amendment changes the original contract to provide transportation services for Multnomah County residents only. Clackamas and Washington Counties are making separate arrangements with Tri-Met for transportation. Continuation of the Tri-County arrangement, which Multnomah County managed, would have resulted in a reduction to services to Multnomah County residents due to the higher cost of providing transportation in the other two counties.

MULTNOMAH COUNTY SOCIAL SERVICES DIVISION
CONTRACT AMENDMENT NUMBER 1

DURATION FROM: 07/01/89 TO: 06/30/90
CONTRACTOR NAME: TRI-MET
CONTRACTOR ADDRESS: 4012 S.E. 17TH AVE.
PORTLAND OR 97202

TELEPHONE: 238-4879
IRS NO.: 93-0579353

This AMENDMENT to the Contract for Social Services is made between:

The Multnomah County Social Services Division, referred to as the COUNTY, and
TRI-MET, referred to as the CONTRACTOR.

It is understood by the parties that all conditions and agreements in the original
Contract not superseded by this AMENDMENT are still in force and apply to this
AMENDMENT.

PART I - Financial Summary

DATE: 11/02/89

Service Element	Funding Source	Original Amount	Increase (Decrease)	Revised Amount	Payment Basis
1.) DD53 ET - SMHD		Requirements	Change in	Requirements	As per Special
Employment Transportation			Payment Conditions		Conditions
TOTALS:		Requirements		Requirements	

Above amounts are subject to the Notes and Special Conditions in Part II below.

Multnomah County Social Services Division
Contract Amendment Number 1

CONTRACTOR:
TRI-MET

DATE: 11/02/89

Part II - Notes and Special Conditions

Notes:

- 1.) DD53 ET Employment Transportation Special Conditions are revised to terminate the arrangement by which the COUNTY has historically paid for services for persons residing in Washington and Clackamas Counties. Effective 10/1/89, Multnomah County will pay only for rides for MULTNOMAH COUNTY residents as authorized by the Vocational Program Development Specialist. Also, the rates per ride and the monthly deductions applied to the total bill charged the COUNTY are changed effective 7/1/89 to 6/30/90. Finally, Reporting Requirements are also revised in conjunction with these changes. These changes result from negotiations with the CONTRACTOR regarding service rates and volume, and the amount of the contribution by CONTRACTOR towards the cost of providing rides. See Special Conditions for details.

Special Conditions:

All existing Special Conditions remain in effect, and the following are added:

- 1.) DD53 ET - Section 8.2 as revised.

MULTNOMAH COUNTY
SOCIAL SERVICES DIVISION
DEVELOPMENTAL DISABILITIES PROGRAM
FISCAL YEAR 1989-90 CONTRACT CONDITIONS

8 DD 53 EMPLOYMENT TRANSPORTATION

8.2 MULTNOMAH COUNTY REQUIREMENTS

8.2.1 TRI-MET - DOOR-TO-DOOR TRANSPORTATION

8.2.1.1 STATEMENT OF WORK

Rides - Subject to scheduling requirements and availability, Tri-Met shall provide rides to Multnomah County clients as ordered by COUNTY'S Vocational Program Development Specialists for the period from 7/1/89 to 9/30/89, and for Multnomah County clients only from 10/1/89 to 6/30/90.

Scheduling Requirements - All rides under this agreement shall be scheduled by COUNTY with Tri-Met at least 48 hours in advance of the ride and in accordance with agreed upon scheduling procedures.

Scope of Service - Tri-Met shall provide door-to-door service and assistance to passengers to safely enter and leave Tri-Met vehicles. COUNTY shall not request rides for clients so severely disabled as to require ambulance service. The COUNTY shall be responsible for informing its clients of the scope of service to be rendered by Tri-Met under this agreement.

8.2.1.2 CONSIDERATION - BASIS FOR PAYMENT

Payment will be made monthly for individual rides upon submission of a bill using the following rates subject to deductisns described below:

The cost per person per trip is determined by the distance in direct miles traveled and the grouping. The rates are::

	<u>0 - 4 miles</u>	<u>5 - 10 miles</u>	<u>Over 10 miles</u>
Individual trip	\$3.27	\$10.88	\$26.10
Group trip	\$1.64	\$ 5.44	\$13.05

The following definitions apply to the above rate structure:

Direct Miles - The distance in miles between the trip origin and the trip destination as shown on a map, or "as the crow flies."

Individual Trip - A one-way trip from one origin to one destination made by one person.

MULTNOMAH COUNTY
SOCIAL SERVICES DIVISION
DEVELOPMENTAL DISABILITIES PROGRAM
FISCAL YEAR 1989-90 CONTRACT CONDITIONS

8 DD 53 EMPLOYMENT TRANSPORTATION (Continued)

8.2.1 TRI-MET - DOOR-TO-DOOR TRANSPORTATION (Continued)

8.2.1.2 CONSIDERATION - BASIS FOR PAYMENT (Continued)

Group Trip - A one-way trip from one origin to one destination made by two or more persons and scheduled together.

Late cancels and no-shows are considered one-fourth and one-half of a ride, respectively, for billing purposes.

Monthly bill deductions shall be calculated by CONTRACTOR on a monthly statement provided to the COUNTY as follows:

- A. 40% of the total individual rider costs for the monthly bill will be discounted.
- B. Eight dollars (\$8.00) per authorized, named rider regardless of actual rider fees collected by CONTRACTOR. CONTRACTOR is responsible for collecting these fees. Rider count will be computed by CONTRACTOR on monthly billing detail submitted by CONTRACTOR.
- C. \$7,000 per month for the months of July, August and September, 1989 only will be discounted, a total of \$21,000.

Tri-Met will submit a detailed monthly ridership billing statement including:

- 1. Billing grouped by county of residence for the period 7/1/89 to 9/30/89 only.
- 2. Summary of trips by charge code for each month.
- 3. Summary of trips by purpose.

COUNTY will pay actual rider costs after the deductions have been applied.

8.2.1.3 SUBCONTRACTS

Tri-Met may enter into subcontracts for work scheduled under this agreement without obtaining prior written approval from COUNTY. Any subcontracts entered into will not terminate the legal responsibility of Tri-Met to COUNTY.

In witness whereof, the parties hereto have caused this Agreement to be executed by their authorized officers.

CONTRACTOR:

MULTNOMAH COUNTY, OREGON

By _____
Agency Executive Director Date

By Susan Clark 11-14-89
Program Manager Date

By _____
Agency Board Chairperson Date

By Dary W. Smatt 11/20/89
Social Services Division Director Date
RATIFIED

Multnomah County Board
of Commissioners
By Gladys McCoy 12/21/89
Gladys McCoy Date
Multnomah County Chair

REVIEWED:

LAURANCE KRESSEL, County Counsel
for Multnomah County, Oregon

By [Signature] 11-29-89
Deputy County Counsel DATE

DATE SUBMITTED _____

(For Clerk's Use)

Meeting Date 12/21/89
Agenda No. R-16

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: Contract With Portland State University

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Human Services DIVISION Aging Services

CONTACT Bill Thomas/John Pearson TELEPHONE 248-5464

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Duane Zussy/Jim McConnell

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Retroactive contract with the Regional Research Institute (RRI) at Portland State University for \$41,873 to evaluate two (2) demonstration projects, the Oregon Partners In Energy Chronic Arrearages Project funded by State Community Services and the Homeless Family Self Sufficiency Project funded by the U.S. Department of Health and Human Services.

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA 5

IMPACT:

PERSONNEL

☒ FISCAL/BUDGETARY

☐ - General Fund

Other _____

3 originals sent to
Bill Thomas 12/26/89

MULTICOPY
OREGON

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: Duane Zussy

BUDGET / PERSONNEL /

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) [Signature]

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

MULTNOMAH COUNTY OREGON

Contract # 102330

Amendment # _____

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement <u>R-160</u> <u>12/21/89</u>

Contact Person Bill Thomas/John Pearson Phone 248-5464 Date 11/30/89

Department Human Services Division Aging Services Bldg/Room 161/2nd Floor

Description of Contract Intergovernmental agreement with Regional Research Institute (RRI) at Portland State University for \$41,873 to evaluate two (2) demonstration projects; one funded by State Community Services and one funded by the U.S. Department of Health and Human Services.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name Portland State University

Mailing Address PO Box 751

Portland, OR

Phone 725-4094

Employer ID # or SS # 936001786

Effective Date July 1, 1989

Termination Date June 30, 1990

Original Contract Amount \$41,873

Amount of Amendment \$ _____

Total Amount of Agreement \$41,873

Payment Term

☐ Lump Sum \$ _____

☐ Monthly \$ _____

☒ Other \$ _____

☐ Requirements contract - Requisition required.

Purchase Order No. _____

☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager Diana Zussy

Purchasing Director
(Class II Contracts Only) [Signature]

County Counsel [Signature]

County Chair/Sheriff [Signature]

Date 12/7/89

Date _____

Date 12.7.89

Date 12/31/89

VENDOR CODE				VENDOR NAME						TOTAL AMOUNT	\$	
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND	
01.	156	010	0144 C147		CA04	6060		1754		8,000		
02.	156	010	0144 C147		CA04	6060		1766		33,873		
03.												

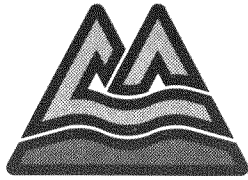
INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
AGING SERVICES DIVISION
COMMUNITY ACTION PROGRAM OFFICE
426 S.W. STARK, 5TH FLOOR
PORTLAND, OREGON 97204
(503) 248-5464

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Gladys McCoy
Multnomah County Chair

VIA: Duane Zussy, Director *Duane Zussy*
Department of Human Services

FROM: Jim McConnell, Director *JMCC*
Aging Services Division

DATE: November 30, 1989

SUBJECT: Approval of Retroactive Contract with Portland State University
Regional Research Institute for Human Services

RECOMMENDATION: The Aging Services Division recommends that the Board of County Commissioners retroactively ratify the attached contract, as an intergovernmental agreement with Portland State University Regional Research Institute for Human Services, for the period July 1, 1989, to June 30, 1990.

RETROACTIVE STATUS: This contract for evaluation services contains both Demonstration Partnership Program (DPP) and Oregon Partners in Energy (OPIE) funds. Negotiations over contract language among ASD, County Counsel, and PSU were concluded in September. However, this contract was delayed in order to process it concurrently with an amendment to the County's contract with State Community Services for OPIE carryover funds. That amendment, requested in August but only recently received, adds sufficient carry-over funds to pay for RRI evaluation services, as well as extends the contract period for those funds from October 31, 1989, to June 30, 1990. Without the amendment RRI could not have carried out the evaluation services. Further, although services did not begin under the DPP Homeless Family Self-Sufficiency Project until late September 1989, retroactive approval to July 1 is requested in order to reimburse the contractor for expenses incurred during July 10-12, 1989, when a Regional Research Institute staff member attended a mandatory DPP evaluation workshop in Washington, DC.

ANALYSIS: The OPIE Chronic Arrearages demonstration project was originally funded by State Community Services for the period November 1, 1988, to October 31, 1989. With the extension, case management services by Portland Impact now will continue through December, 1989. For \$8,000 RRI will conduct an analysis of data on client attitudes and energy consumption to determine if case management and co-payment requirements have had a positive impact on clients with a history of chronic utility arrearages.

The DPP Homeless Family Self-Sufficiency Project was funded by the US Department of Health and Human Services, Family Support Administration, Office of Community Services (OCS) for a two year period beginning July 1, 1989. The grant award required a third party evaluation component. This fiscal year \$33,873 will be contracted to RRI, with an additional \$29,404 contracted for FY 90-91. Services will include both process and outcome evaluation of intensive case management services provided by Portland Impact to at least 75 homeless families, as compared to a control group of 30 homeless families.

BACKGROUND: A notice of intent to apply for the OPIE Chronic Arrearages project, and a subsequent revenue contract, were approved by the BCC last fiscal year. In August, 1988, Portland Impact and RRI developed the DPP grant application to OCS in partnership with DHS as the designated community action agency for Multnomah County. The BCC approved the notice of intent to apply for this grant in August 1988 and ratified the grant award on August 31, 1989.

MULTNOMAH COUNTY
DEPARTMENT OF HUMAN SERVICES
AGING SERVICES DIVISION
SUBCONTRACT AGENCY AGREEMENT

DURATION OF AGREEMENT: JULY 1, 1989 TO: JUNE 30, 1990

CONTRACTOR NAME: PORTLAND STATE UNIVERSITY REGIONAL TELEPHONE: 464-4094
RESEARCH INSTITUTE FOR HUMAN SERVICES

CONTRACTOR ADDRESS: P.O. BOX 751 I.R.S. NUMBER: 936001786
PORTLAND, OREGON 97207

This Contract is made and entered into by and between the Department of Human Services, Aging Services Division acting on behalf of Multnomah County, a political subdivision of the State of Oregon, hereinafter referred to as "COUNTY", and the State of Oregon acting by and through the State Board of Higher Education on behalf of Portland State University, hereinafter referred to as "CONTRACTOR".

PART I: SERVICES UNDER REIMBURSEMENT

Subject to the General Conditions, Special Conditions and the exhibits attached hereto and by reference made part of this Contract, CONTRACTOR agrees to provide identified services within the service element(s) listed below. Based upon approved work plans and budgets, and upon continuing satisfactory compliance with the terms and conditions of this Contract, COUNTY agrees to reimburse CONTRACTOR for eligible program expenditures incurred by CONTRACTOR in providing the services specified in this Contract, for the periods and up to the maximum amounts specified.

SERVICE ELEMENT: EVALUATION SERVICES			MAX. ANNUAL
<u>Revenue</u>	<u>From</u>	<u>To</u>	<u>TOTAL PAYABLE</u>
OREGON PARTNERS IN ENERGY (OPIE/SW) FFY 89 CHRONIC ARREARAGES DEMO. PROJECT	July 1, 1989	March 31, 1990	\$ 8,000
OFFICE OF COMMUNITY SERVICES (OCS) FFY 89 DEMONSTRATION PARTNERSHIP PROGRAM	July 1, 1989	June 30, 1990	\$ 33,873
TOTAL CONTRACT			\$ 41,873

PART II: GENERAL CONDITIONS

WHEREAS, COUNTY is authorized to obtain, by Contract, the services necessary to conduct its operation as the designated community action agency for Multnomah County, pursuant to ORS 184.802; and

WHEREAS, CONTRACTOR has available, or can cause to be provided, the facilities and staff required for the performance of specified evaluation services; and

WHEREAS, COUNTY and CONTRACTOR are agreeable to the terms and conditions hereinafter set forth governing the provision of said services as stated below:

I. Service Objectives and Approvals.

A. CONTRACTOR agrees to provide contracted services in the volume and consistent with the objectives and evaluation criteria specified in this Contract. CONTRACTOR shall perform in a satisfactory manner the work plan for each revenue source during the contract period for which funds are delegated under this agreement. CONTRACTOR shall make no changes or amendments to work plans approved by COUNTY without requesting prior approval of COUNTY for such changes or amendments. These work plans are attached hereto as Exhibits A and by this reference made a part hereof.

B. CONTRACTOR shall perform all activities in accordance with the approved work plans, the approved budgets and the terms of this Contract. The work plans and budgets shall be prepared by CONTRACTOR in the format and shall contain all information requested by COUNTY.

C. CONTRACTOR shall prepare a separate budget for each revenue source for which funds are delegated under this agreement. These budget summaries are attached hereto as Exhibits B and by this reference made a part hereof. The budget summaries shall separately allocate the total funds delegated under this Contract for each revenue source to each of the line item categories specified therein. CONTRACTOR shall make no changes between line item categories as shown in approved budget summaries without submission of a written request to COUNTY for a budget modification and without prior written approval of COUNTY and applicable funding source.

II. Standards and Evaluation.

A. CONTRACTOR shall comply with all federal, state, COUNTY and local statutes, codes, rules, regulations, plans, policies, requirements, procedures, instructions, guidelines, and funding criteria governing services, facilities and operations as applicable to this Contract, or the work to be performed, or funds delegated under this Contract.

Revenue specific laws, regulations, plans, and instructions with which CONTRACTOR must comply, as well as revenue specific limitations or conditions on the use of funds, are cited in Exhibits C attached hereto and by this reference made a part hereof.

B. CONTRACTOR shall comply with all applicable licensing and certification requirements.

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C. CONTRACTOR shall be bound by all applicable terms and provisions of current agreements between COUNTY and applicable funding sources for provision of emergency basic needs and community action services. These contracts are attached hereto as Exhibits D and by this reference made a part hereof.

CONTRACTOR is further bound by all applicable federal and state statutes, rules, and regulations, including but not limited to specific laws and instructions which govern revenue sources delegated under this Contract.

D. CONTRACTOR shall prepare and maintain such records as are necessary for performance of the approved work plans and for compliance with the terms of this Contract. Further, CONTRACTOR agrees to maintain program, client, and fiscal records consistent with Oregon Administrative Rules and applicable federal rules and regulations, and fiscal records consistent with current, generally accepted accounting principles. Record retention shall be based upon OAR 166-40-1075.

E. CONTRACTOR agrees to permit inspection of program, facilities, and client and fiscal records by authorized agents of COUNTY and funding sources.

F. CONTRACTOR shall provide for program and facility reviews when required to do so by COUNTY or applicable funding sources for the purpose of monitoring this Contract or auditing CONTRACTOR performance, including: review of services and fiscal records, policies and procedures; review of staffing patterns and job descriptions; meetings with consumers; and meetings with staff directly or indirectly involved in the performance of this Contract.

G. CONTRACTOR shall ensure that its employees are adequately trained to carry out the activities required under this Contract.

III. Subject to Availability of Funds and Dual Payments.

A. Both parties agree that this Contract is subject to the availability of federal, state, COUNTY and local funds, and is also subject to initial and continuing approval by funding sources of CONTRACTOR work plans and budgets.

B. In the event that funds are not available to COUNTY in the amounts anticipated, COUNTY may by amendment reduce Contract funding accordingly or terminate the Contract as necessary. COUNTY will notify CONTRACTOR as soon as it receives notification from funding sources of such decisions. Reduction or termination will not affect payment for allowable expenses incurred prior to the effective date of such action.

C. Upon review of the quarterly reports filed by CONTRACTOR pursuant to Section XV hereof, COUNTY or funding source may adjust the amount of funds delegated to CONTRACTOR upward or downward to reflect the actual or anticipated expenditure of funds, for any revenue source contained in this agreement.

D. CONTRACTOR shall not be compensated through dual payments for work performed under this Contract from any other County department or department of the State of Oregon, nor from any other source including the federal government, unless such funds are used solely to increase the total services to be provided under this agreement. Any funds received through or for activities arising under this agreement shall immediately be reported to COUNTY.

IV. Cooperative Planning Requirements. CONTRACTOR recognizes that planning with COUNTY and state and local agencies is essential to the success of a coordinated service delivery system. CONTRACTOR agrees to attend as is reasonable and to participate in all meetings and planning efforts instigated by COUNTY, to provide all data which may be required by COUNTY, and to adjust its programs as necessary to achieve compliance with programmatic goals of COUNTY and applicable funding sources. CONTRACTOR shall be responsible to update COUNTY regularly on CONTRACTOR activities that have an impact on the emergency basic needs and community action services system.

V. Identification of Services.

A. CONTRACTOR agrees to identify the services provided by CONTRACTOR under this Contract as a coordinated part of the COUNTY'S emergency basic needs and community action program. CONTRACTOR will acknowledge Multnomah County as the governing authority for emergency basic needs and community action services and the Department of Human Services as a funding source for evaluation services in flyers, brochures, plans, reports, and other publicly disseminated information that describe services funded under this Contract.

B. All published material, videos, and announcements related to the Demonstration Partnership Program should include the following disclaimer: "This (publication/video) was developed under a grant from the Department of Health and Human Services, Office of Community Services. However, the contents do not necessarily represent the policy of the Department of Health and Human Services and you should not assume endorsement by the Federal government unless so granted."

VI. Authority of Director. CONTRACTOR agrees to recognize the Director of the Aging Services Division or his designee (hereafter referred to as "Director.") as COUNTY's administrative authority for the countywide community action agency and for services provided under this Contract. Disputes arising from this Contract will be resolved when possible at the lowest appropriate management levels as is consistent with established procedures, followed by consultation with the Board of County Commissioners as deemed appropriate by the Director.

VII. Discrimination, Prohibitions and Special Federal and State Requirements. CONTRACTOR assures and certifies with respect to funds delegated and made available under this Contract that:

A. CONTRACTOR will comply with the following: all applicable provisions of Executive Order 11246 entitled "Equal Employment Opportunity" as amended by Executive Order No. 11375 of the President of the United States dated September 24, 1965, and as supplemented in Department of Labor Regulations (41 CFR Part 60); Title VI of the Civil Rights Act of 1964 (P.L. 88-352); Section 504 of the Rehabilitation Act of 1973 (29 USC S 701 et seq.) as implemented by 45 CFR 84.4; and the Age Discrimination Act of 1975 (42 USC S 6101 et seq.). CONTRACTOR shall ensure that no person or group of persons shall, on the grounds of age, race, color, national origin, primary language, sex, religion, handicap, political affiliation or belief, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which CONTRACTOR receives federal financial assistance or which is funded in whole or in part with funds made available through this Contract. CONTRACTOR will immediately take any measures necessary to effectuate this agreement.

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B. CONTRACTOR will comply with Title VI of the Civil Rights Act of 1964 (42 USC 2000d) prohibiting employment discrimination where (1) the primary purpose of a grant is to provide employment or (2) discriminatory employment practices will result in unequal treatment of persons who are or should be benefitting from the grant-aided activity. CONTRACTOR shall not unlawfully discriminate against any individual with respect to hiring, compensation, terms, conditions or privileges of employment. CONTRACTOR will also comply with all applicable rules, regulations and orders of the Secretary of Labor concerning equal opportunity in employment and the provisions of ORS Chapter 659, and all applicable State laws concerning equal opportunity.

C. CONTRACTOR will comply with requirements of the provisions of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970 (P.L. 91-646) which provides for fair and equitable treatment of persons displaced as a result of federal and federally assisted programs.

D. CONTRACTOR will comply with the provisions of the Hatch Act which limits the political activity of employees with respect to funds delegated under this agreement. CONTRACTOR further acknowledges that no government funds delegated under this Contract shall be used for political activities. Specifically, no funds committed to this program shall be used to engage in lobbying or other activities intended to influence legislation, nor be used directly or indirectly for advocacy of a particular party, candidate, or political program, whether partisan or nonpartisan.

E. CONTRACTOR acknowledges that there will be no religious content or materials disseminated in any of the programs or services funded through this Contract. CONTRACTOR further assures that no portion of any property or facility acquired or renovated in whole or in part with funds awarded or otherwise acquired pursuant to this Contract will be used for religious worship, sectarian instruction or any other religious purpose. The language in this section is not intended to abridge a client's individual right to exercise freedom of religion and/or speech.

F. CONTRACTOR will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act, as they apply to hospital and educational institution employees of state and local governments.

G. CONTRACTOR shall establish safeguards to prohibit employees from using their positions for a purpose that is or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business or other ties.

H. CONTRACTOR shall ensure that the facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of a project under this Contract are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify the Department of Energy or Health and Human Services of the receipt of any communication from the director of the EPA Office of Federal Activities indicating that a facility to be used in the project is under consideration for listing by the EPA.

I. CONTRACTOR will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973, Public Law 93-234, 87 Stat 975, approved December 31, 1976. Section 102(a) requires, on and after March 2, 1975, the purchase of flood insurance in communities where such insurance is available as a condition for the receipt of any federal financial assistance for construction or acquisition purpose for use in any area that has been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards.

The phrase "federal financial assistance" includes any form of loan, grant, guaranty, insurance payment, rebate, subsidy, direct or indirect federal assistance.

J. CONTRACTOR will assist the Department of Energy or Health and Human Services in their compliance with Section 106 of the National Historic Preservation Act of 1966 as amended (16 USC 469a-1 et seq.) by (a) consulting with the State Historic Preservation Officer on the conduct of investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (see 36 CFR Part 800.8) by the activity and notifying the Department of Energy or Health and Human Services of the existence of any such properties, and by (b) complying with all requirements established by the Department of Energy or Health and Human Services to avoid or mitigate adverse effects upon such properties.

K. CONTRACTOR additionally shall provide the COUNTY with written assurance upon request that CONTRACTOR will comply with all applicable standards, orders, and requirements issued under Section 306 of the Clean Air Act, Section 508 of the Clean Water Act, Executive Order 11738, and Environmental Protection Agency Regulations, and further, CONTRACTOR agrees to promptly report all infractions to COUNTY.

L. CONTRACTOR agrees to abide by all mandatory standards and policies which relate to energy efficiency and which are contained in the State of Oregon energy conservation plan which was issued in compliance with the Energy Policy and Conservation Act (P.L. 94-165).

M. CONTRACTOR certifies that it is not ineligible to enter into this Contract by virtue of reasons specified in "Certification Regarding Debarment, Suspension and Other Responsibility Matters" which shall be signed by CONTRACTOR, and attached hereto in Exhibit E and by this reference incorporated herein.

N. CONTRACTOR shall provide written "Assurance of Compliance regarding Nondiscrimination in Federally Assisted Programs" as specified by the U.S. Department of Energy, which shall be signed by CONTRACTOR and attached hereto in Exhibit E and by this reference incorporated herein.

O. CONTRACTOR certifies that it will maintain drug-free workplaces. In accepting this Contract, CONTRACTOR agrees to be bound by the certification standards contained in U.S. Department of Health and Human Services "Certification Regarding Drug-Free Workplace Requirements for Grantees Other Than Individuals", which shall be signed by CONTRACTOR and attached hereto in Exhibit E and by this reference incorporated herein.

P. CONTRACTOR certifies that it is not employed by or contracting with the federal government for the work covered by this agreement.

VIII. Liability.

A. CONTRACTOR certifies that the work performed under this Contract is that of an independent contractor and that CONTRACTOR is solely responsible for the conduct of its programs. CONTRACTOR, its employees, and agents shall not be deemed officers, employees or agents of COUNTY, State Community Services, or other funding sources, as those terms are used in ORS 30.265 with respect to work performed under this agreement or for any other purpose.

B. To the extent permitted by Oregon Law (ORS 30.260-30.300) and the Oregon Constitution, Article XI Section 7, CONTRACTOR shall defend, hold and save harmless COUNTY, State Community Services and other funding sources, their officers, agents and employees, from damages arising out of the tortious acts of CONTRACTOR, or its officers, agents and employees, acting within the scope of their employment and duties in performance of this agreement.

C. CONTRACTOR agrees that liability insurance coverage for CONTRACTOR'S agents and employees is the sole responsibility of CONTRACTOR.

Such liability insurance shall have limits provided therein of not less than:

1. \$50,000 to any claimant for any number of claims for damage to or destruction of property, including consequential damages, arising out of a single accident or occurrence.

2. \$200,000 for injury to any one person arising out of a single accident or occurrence.

3. \$500,000 for total injuries and damages for any number of claims arising out of a single accident or occurrence.

These limits shall not limit indemnities under the preceding paragraph.

D. CONTRACTOR shall furnish to COUNTY a declaration that CONTRACTOR is self-insured for public liability and property damage for a minimum of the amounts set forth in either ORS 30.270 or the amounts listed above, whichever is greater. This declaration shall be attached to this agreement in Exhibit F and is incorporated herein as part of this Contract.

E. In the event that during the term of this Contract ORS 30.270 is amended to increase the maximum amounts of liability imposed upon municipalities of the State of Oregon, CONTRACTOR agrees to increase the minimum limits of its liability insurance coverage accordingly.

F. All property and equipment purchased or received by CONTRACTOR under this Contract must be insured by CONTRACTOR against fire, theft and destruction at replacement cost throughout its useful life, or otherwise with minimum limits at fair market value at time of purchase by CONTRACTOR.

G. Failure to maintain current insurance as provided in this Contract may, at COUNTY's option, result in withholding of payments or may be cause for immediate termination of the Contract.

IX. Fidelity Bond. CONTRACTOR is not required to obtain a fidelity bond.

X. Worker's Compensation.

A. CONTRACTOR shall maintain Workers' Compensation insurance coverage for all non-exempt workers and employees either as a carrier insured employer or a self-insured employer as provided in Chapter 656 of Oregon Revised Statutes. A certificate showing current Workers' Compensation insurance or a copy thereof, or a declaration of self insurance, is attached to this agreement in Exhibit F and is incorporated herein as part of this Contract.
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B. In the event that CONTRACTOR's Workers' Compensation insurance coverage is due to expire during the term of this agreement, CONTRACTOR agrees to renew such insurance before such expiration and to provide COUNTY a certificate of Workers' Compensation insurance coverage upon such renewal.

XI. Subcontracts. CONTRACTOR shall not enter into any subcontract for any funds delegated under this Contract.

XII. Litigation. CONTRACTOR shall give COUNTY immediate notice in writing of any action or suit filed or any claim made of which CONTRACTOR may be aware of against CONTRACTOR which, in the opinion of CONTRACTOR, may result in litigation related in any way to this agreement.

XIII. Monitoring and Sanctions.

A. COUNTY is responsible for monitoring services provided by CONTRACTOR to ensure that all services conform as applicable to COUNTY and funding source standards, as well as to performance requirements specified in approved workplans and this Contract. COUNTY shall take all appropriate management and legal action necessary to pursue this responsibility.

B. CONTRACTOR will be subject to a financial contract compliance review during the period of the Contract. CONTRACTOR shall abide by such financial procedures as may be specified in writing by COUNTY. Under the Single Audit Act of 1984 (PL 98-502) and funding source contracts, COUNTY is responsible for monitoring fiscal performance of CONTRACTOR, as well as compliance with the terms and conditions of this Contract. COUNTY shall take all appropriate management and legal action necessary to pursue this responsibility. However, this Contract does not act as a limitation on the authority of COUNTY to pursue any legal and administrative remedies available to it.

C. Program and fiscal monitoring of CONTRACTOR will be done at regular intervals, and shall occur not less than once annually and as frequently as necessary to ensure: that services conform to applicable standards and performance requirements; that all regulations and procedures are being complied with; that expenditures conform to approved budgets; and that COUNTY funds are being spent only for authorized purposes. COUNTY staff will give reasonable notification of monitoring schedules. CONTRACTOR shall provide all records requested by COUNTY for this monitoring.

D. Monitoring shall include, as applicable, but not be limited to: 1) inspection of client files, program records and reports, inventory records, and fiscal records including original receipts for expenditures; 2) review of compliance with contract provisions, work plans, budget reports, and state and federal regulations; and 3) physical inventory of fixed assets and materials.

E. CONTRACTOR will be advised within ten (10) working days after the monitoring visit of findings. If the monitoring identifies deficiencies, preliminary findings will be issued with examples and corrective action will be requested. CONTRACTOR will have ten (10) working days from receipt of the preliminary findings to request assistance, to file a corrective plan or to explain why the findings are in error.

COUNTY shall notify CONTRACTOR of its acceptance or rejection of all or part of CONTRACTOR's response within five (5) working days. CONTRACTOR will have an additional five (5) working days to provide an acceptable corrective action plan for any remaining, unresolved deficiencies.

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If unresolved deficiencies remain, COUNTY shall transmit to CONTRACTOR a finding of facts detailing the specific deficiencies and required corrective actions. At COUNTY's direction, CONTRACTOR shall have no less than five (5) and no greater than twenty (20) working days to complete corrective actions, unless CONTRACTOR specifically requests and justifies in writing and COUNTY subsequently approves a longer period for compliance.

F. If corrective actions have not taken place by the end of the specified period, COUNTY will notify CONTRACTOR of the sanctions it will apply. Such sanctions may include, without limitation: withholding of funds, disallowance of costs, suspension of payments, or termination of this agreement. COUNTY will inform CONTRACTOR of the appeals process in its sanction notice.

G. The rights and remedies of COUNTY provided in the above clause shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Contract.

XIV. Audits.

A. CONTRACTOR shall permit authorized representatives of COUNTY, and as applicable of State Community Services, the Secretary of State's Office of the State of Oregon and its Division of Audits, and the applicable audit agencies of the United States government, to have free access to the books, documents, papers, audits and records of CONTRACTOR which are directly pertinent to this agreement, for the purpose of making audit, examination, excerpts, and transcripts; or to make such review of the records of CONTRACTOR that these entities may deem necessary to satisfy audit and/or program evaluation purposes. CONTRACTOR shall permit authorized representatives of COUNTY and/or applicable funding sources to site visit all programs and activities funded in whole or in part by this agreement.

B. Within two weeks of its issuance date, but in no case later than 150 days after the end of the CONTRACTOR's fiscal year, CONTRACTOR shall provide to COUNTY a copy of the Portland State University section of the Report of the Controller for the Oregon State System of Higher Education, which shall list all receipts and expenditures, from whatever source, whether cash or non-cash.

C. CONTRACTOR is responsible for determining and adhering to applicable audit requirements. All fiscal records and audits required hereunder must be prepared and maintained consistent, as applicable to CONTRACTOR, with the following:

1. Standards contained in the U.S. General Accounting Office (GAO) publication entitled "Guideline for Financial and Compliance Audits of Federally Assisted Programs" and the GAO publication entitled "Standards for Audit for Governmental Organizations, Programs, Activities and Functions" (1981) by the Comptroller General of the United States. Information contained in the audit report shall be in accordance with Chapters V.B.2 and VII. D and E of these Standards;

2. The Single Audit Act of 1984, P.L. 98-502, Title 31, Section (2), v, Chapter 75, USG;

3. Generally accepted accounting principles as defined by the American Institute of Certified Public Accountants, Inc., as such may change from time to time;

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4. Applicable Office of Management and Budget (OMB) circulars as they relate to the application, acceptance and use of federal funds, including Circular A-110.

5. Oregon Administrative Rules (OAR);

6. Such budget and financial procedures as may be specified in writing by COUNTY.

D. Within two weeks of the issuance date to CONTRACTOR, CONTRACTOR shall submit a copy to COUNTY of any financial or performance audits relevant to this contract which are conducted by the Oregon Secretary of State's office.

E. CONTRACTOR shall establish and maintain systematic methods to assure timely and appropriate resolution of any review/audit findings and recommendations from the Secretary of State's office.

F. Failure to submit timely and complete reports/audits which are in compliance with the standards of this section, or failure to submit evidence of timely compliance with audit findings and recommendations, by specific deadlines will be cause for withholding any or all payments under this Contract, at COUNTY's option, until satisfactory audits and evidence are submitted.

G. All audit work papers pertaining to the annual audit shall be retained for three years following the date the audit is submitted to COUNTY and shall be open for examination by any and all COUNTY and applicable funding source auditors and/or representatives.

XV. Program Reporting and Payment Requirements.

A. CONTRACTOR shall prepare and furnish such plans, work plans, data, descriptive information and reports as may be requested by COUNTY, as needed by COUNTY to perform its monitoring activities, and/or as needed by COUNTY to comply with state or federal requirements.

B. CONTRACTOR agrees to, and does hereby grant COUNTY and applicable funding sources the right to reproduce, use, and disclose all or any part of the plans, reports, data, and technical information furnished to COUNTY.

C. Funds under this Contract will be paid monthly to CONTRACTOR by revenue source as reimbursement for costs incurred, upon receipt of invoices and required reports. Such payments shall be subject to CONTRACTOR's continuing compliance with the terms and conditions of this Contract.

D. CONTRACTOR shall submit timely, complete and accurate fiscal and program reports to COUNTY detailing all administration and program expenditures and the progress made toward program objectives specified in approved work plans. Reports for each revenue source delegated under this Contract shall be submitted with the frequency and content and in the format as provided below. The reports must agree with the accounting records maintained by CONTRACTOR and be certified by the chief executive officer or a designated representative of CONTRACTOR.

1. Monthly Expenditure Reports: Actual monthly administration, program, and total expenditures of CONTRACTOR reported by revenue source; aggregated in line item fiscal categories specified by funding source; comparing year to date expenditures to the approved budget; and completed in a format specified by COUNTY. These reports are due by the close of business on the fifteenth (15th) working day of the month following incurred expenditures.
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2. Quarterly Program Reports: A quantitative and narrative report of year to date program accomplishments, reported by revenue source; addressing performance measures specified by funding source and in approved work plans; and completed on forms or in a format specified by and containing all information requested by COUNTY. These reports are due by the close of business on the fifteenth (15th) working day of the month following the last day of each calendar quarter.

3. Annual Budget: An approved annual budget for CONTRACTOR's administration and program operations, arrayed by revenue source, in a format specified by COUNTY and with accompanying personnel detail, due upon COUNTY's receipt of executed Contract; approved revisions to the annual budget(s) for CONTRACTOR's administration and program operations, arrayed by revenue source and in a format specified by COUNTY, are due upon COUNTY's receipt of executed Contract amendments which modify CONTRACTOR's administration and/or program operations budgets. CONTRACTOR's annual budget and budget amendments shall be attached hereto in Exhibit B and by this reference made a part hereof.

E. Monthly payments are contingent upon and triggered by COUNTY's receipt of properly executed fiscal and program reports. It is the sole responsibility of the CONTRACTOR to submit required reports in order to obtain Contract payments.

F. If required reports are complete, accurate, and correct, COUNTY agrees to issue a monthly payment by the second Wednesday following submission.

G. All final budget and expenditure reports and billings shall be received by COUNTY by the close of business on the forty fifth (45th) calendar day after all funded activities are completed or the end of the grant period for each revenue source as set out in this Contract, whichever is earlier; or after the expiration date or termination date of this Contract, whichever is earlier. Expenses not reported and Contract payments not triggered or billed within this specified time period shall be the sole responsibility of CONTRACTOR and shall not be paid by COUNTY.

XVI. Fiscal Management and Recovery of Funds.

A. CONTRACTOR shall prepare and maintain accurate financial records documenting all expenditures made from funds delegated under this Contract. These records shall include adjustments to reconcile the accounting records, the financial reports to COUNTY, and the audit report for the common accounting period.

B. Expenditures of CONTRACTOR may be claimed under this Contract only if they are: 1) in payment of eligible activities or for services performed under this Contract in conformance with applicable state and federal regulations and statutes; 2) in payment of an obligation incurred during the applicable Contract period for the revenue source; 3) not in excess of 100% of the funds for the specified revenue source delegated under this Contract, including amendments; 4) not in excess of 100% of the approved budget allocation for the particular line item category for that expenditure; and 5) not for duplicate payment for the same activities or services under both this agreement and any other contract or agreement with COUNTY or other funding source, or under more than one revenue source covered by this agreement. Any costs incurred by CONTRACTOR over and above these amounts shall be at the sole risk and expense of CONTRACTOR.

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C. Expenditures shall be supported by properly executed payrolls, time records, invoices, contracts, vouchers, orders, cancelled checks, and/or any other accounting documents pertaining in whole or in part to the Contract, in accordance with generally accepted accounting principles, Oregon Administrative Rules, and applicable federal requirements as specified herein. Expenditures shall be segregated by revenue source and line item category within CONTRACTOR's accounting system and be so reported on the required fiscal reports.

There shall be up-to-date accounting records accurately reflecting all revenue by source, all expenses by object of expense, and all assets, liabilities and equities, consistent with generally accepted accounting principles and conforming to requirements specified herein.

D. All income that is generated by or attributable to funds delegated under this Contract shall be identified and segregated for expenditures relating to the approved work plan for the revenue source for which the original funds were delegated. If cash is deposited in a combined or centralized income-yielding bank account, an allocation procedure shall be in place to make the necessary income-to-program segregations. This allocation method should be rational and equitable, but not so complex and time consuming that the allocation process is not cost-effective. Expenditures of income from funds delegated under this agreement are to be made within the contract period of the revenue source in which the income is earned.

E. CONTRACTOR agrees to use and maintain accounting practices and cost allocations, and written financial policies and procedures, consistent with standards cited in Section XIV D of this Contract.

F. By no later than the close of business on August 15, 1990, CONTRACTOR shall provide a close-out Financial Statement to COUNTY for the period ending June 30, 1990, which accurately identifies by revenue source all carryover balances for emergency basic needs and community action services revenues which were directly contracted by COUNTY to CONTRACTOR in FY 89-90. If the Controllers' Report for the period ending June 30, 1990, differs from this Financial Statement in any particular, with the Report CONTRACTOR shall submit to COUNTY a reconciliation between the Financial Statement and the Report.

G. All unexpended and unobligated funds or income from such funds remaining at the end of the grant period for each specified revenue source set out in this Contract, or upon the termination of this Contract, must be returned to COUNTY as directed by COUNTY by the close of business on the forty fifth day (45th) following the expiration of the funding period for the revenue source, or the termination of this Contract, whichever is earlier.

H. Recovery of funds by COUNTY will be made as prescribed in this Contract in the event of unauthorized expenditures, non-performance of Contract conditions, excess payments, payment withholding, or Contract termination.

I. Any costs disallowed either upon request for reimbursement or as a result of any audits, review, of site visits of the programs of CONTRACTOR, including any refunds to the federal and state governments, shall be the sole responsibility of CONTRACTOR. Such disallowed costs shall not be paid by COUNTY or funding source, provided that the disallowed costs did not arise from the acts of COUNTY or funding source. CONTRACTOR shall be given an opportunity to demonstrate that any proposed disallowance is in error. If a cost is disallowed after reimbursement has occurred, CONTRACTOR shall make such repayments to COUNTY within twenty (20) working days of receipt of formal notification of disallowance of such CONTRACTOR expenditures.

J. In cases of suspected fraud by applicants, employees or vendors, CONTRACTOR shall cooperate with all appropriate federal, state or COUNTY investigative agencies, and shall assist in recovering invalid payments made by its employees.

K. Any COUNTY funds spent for purposes not authorized by this Contract shall be deducted from payments or refunded to COUNTY. Payments by COUNTY in excess of authorized amounts shall be deducted from payment or refunded to COUNTY as determined by COUNTY no later than twenty (20) working days after written notification by COUNTY. CONTRACTOR shall be responsible for any unrecovered advances provided by COUNTY.

L. All CONTRACTOR records pertaining to services funded by State Community Services under this Contract are the property of SCS, which may take possession of them at any time with three business day's notice to COUNTY. CONTRACTOR may retain copies of all records taken by SCS under this section.

M. All books, documents, papers or other records, including but not limited to client records, income documentation, financial records, invoices, statistical records, and supporting documents pertinent to this Contract shall be retained by CONTRACTOR for three years from the date final payment is made under this agreement or the date of completion of any audit undertaken pursuant to Section XIV hereof, whichever is later. If, however, any audit questions remain unresolved at the end of this three year period, all records must be retained until final resolution. Records involving matters in litigation shall be kept no less than one year after resolution of all litigation, including appeals.

XVII. Procurement and Purchasing.

A. In procuring, by purchase, rental or otherwise, any equipment, supplies or services with funds delegated under this Contract, CONTRACTOR shall obtain prior written approval from COUNTY and funding source before entering into any sole source contract, or a contract where only one bid or proposal is received when the value of the contract is expected to exceed \$10,000 in the aggregate.

B. CONTRACTOR shall obtain prior written approval from COUNTY and funding source before purchasing equipment or other property costing more than \$300 per item. For approved purchases, CONTRACTOR shall solicit, document and retain three (3) written bids before executing purchase of such equipment or other property.

XVIII. Property Management. CONTRACTOR shall be responsible for all property purchased with funds delegated under this Contract. All property purchased in whole or in part with funds delegated under this Contract, including any program income derived from such funds, is the property of COUNTY or applicable funding source. CONTRACTOR shall meet the following procedural requirements for all such property:

A. All certificates of title or other evidences of ownership for items valued at \$100 or more shall show applicable funding source as the owner of such property, and shall have COUNTY identification decal affixed to it.

B. Property records for property valued at \$100 or more shall be prepared and maintained accurately. Such records shall include a description of each item of property; manufacturer's serial number; acquisition date and cost; source of the property; whether the item of property was new or used at the time of acquisition; percentage by funding source of funds used in the purchase of the property; and location, use and condition of the property.

C. A physical inventory of property shall be taken at least once every year to verify the existence, current utilization, and continued need for the property. The results of the physical inventory shall be reconciled with the property records. A control system shall be in effect to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft of the property shall be investigated and fully documented.

D. All such property shall be properly maintained. Adequate maintenance procedures shall be implemented to keep the property in good condition.

E. Within 45 days following the expiration of the contract period for any revenue source or upon termination of this Contract, whichever is earlier, as directed by COUNTY or funding source CONTRACTOR shall transfer back to COUNTY all unexpended and/or nonexpendable property purchased with funds delegated under this contract for that revenue source.

XIX. Retention of Revenue and Earned Interest. All CONTRACTOR fees and third party rebates and reimbursements up to and including the contracted billing amount and interest earned on such funds belong to CONTRACTOR provided that such funds are expended for evaluation services which are approved by COUNTY. Any unexpended interest at the termination of the contract shall be returned to COUNTY in accordance with the provisions herein.

XX. Withholding/Reduction of Contract Payments. Notwithstanding any other payment provision of this Contract, failure of CONTRACTOR to submit complete, accurate, and timely program, audit or other financial reports and property inventory records when due, or failure to perform or document the performance of contracted services, may result in the withholding and/or reduction of payments under this Contract.

At COUNTY option or upon withholding by funding source, COUNTY may withhold any or all payments due to CONTRACTOR under this Contract if CONTRACTOR: fails to comply with reporting obligations; fails to comply with federal audit standards; fails to repay disallowed costs; or violates any other provision of this Contract. Such withholding of payment for cause may continue until CONTRACTOR submits required reports, complies with standards, repays disallowed costs, performs required services, or establishes to COUNTY's satisfaction that such failure arose out of causes beyond the control, and without the fault or negligence of CONTRACTOR. If payment is to be delayed, COUNTY will inform CONTRACTOR in writing within two (2) working days of the decision to take this action.

XXI. Record Maintenance and Confidentiality.

A. CONTRACTOR shall maintain a record for each client who receives services under this Contract unless the service precludes delivery of service on a case-by-case basis. All records and files shall be secured to prevent access by unauthorized persons. Client service files and records shall be retained for a period of five (5) years.

B. All client information obtained by CONTRACTOR in the performance of this agreement shall be considered confidential. CONTRACTOR shall protect the confidentiality of all information concerning applicants for and recipients of services funded by this Contract, and shall not release or disclose any such information for any purpose not directly connected with the administration of the revenue source, or not directly connected with monitoring/evaluation activities by COUNTY or CONTRACTOR, except by written consent or authorization of the applicant, recipient, or the recipient's attorney, responsible parent or guardian. COUNTY and CONTRACTOR will share information only to the extent necessary to effect services to clients.

C. CONTRACTOR shall ensure that all officers, employees and agents are aware of and comply with these requirements.

D. CONTRACTOR agrees that all client records maintained by CONTRACTOR shall be kept confidential in accordance with State and Federal statutes and rules governing confidentiality. Nothing, however, prohibits the disclosure of information in statistical summaries or other forms which do not identify particular individuals.

XXII. Assignment. This Contract shall not be assigned by CONTRACTOR.

XXIII. Amendment. All amendments or modifications to this Contract shall be in writing and shall be attached to this Contract.

A. In the event that COUNTY's Contract obligation is amended by a funding source initiated change, COUNTY shall amend this Contract through written notification of changes delivered to CONTRACTOR by mail or in person. Such amendment shall be effective immediately or otherwise on a date specified by COUNTY in the notification. CONTRACTOR shall acknowledge receipt of the amendment by signing and returning amendment to COUNTY within ten (10) working days of receipt of COUNTY's notification document.

B. At any time either party to this agreement may initiate other amendments or modifications to the Contract, the approved work plans and the approved budgets. All such amendments or modifications which have been mutually agreed upon, whether such changes are COUNTY or CONTRACTOR initiated, shall be reduced to writing, executed as applicable on forms required by COUNTY, and processed for COUNTY and funding source approval of the changes. Following receipt of written notification of the changes, CONTRACTOR shall acknowledge approval of the changes by signing and returning amendment to COUNTY within fifteen (15) working days of receiving the amendment.

XXIV. Termination.

A. Violation of any of the rules, procedures, attachments, or terms of the Contract may, at the option of either party be cause: for termination of the Contract; unless and until corrected, for termination of funding support by COUNTY and services by CONTRACTOR; or for placing conditions on said funding and/or services, which may include withholding or reduction of funds. Waiver by either party of any violation of this Contract shall not prevent said party from invoking the remedies of this paragraph for any succeeding violations of the Contract.

Such violations by CONTRACTOR include but are not limited to: failure to file complete, timely and accurate reports, audits and inventory records; failure to comply with applicable state and federal regulations; failure to comply with approved work plans and approved budgets; and failure to comply with directives and instructions received from a funding source.

B. This Contract may be terminated in whole or in part by either party upon thirty (30) days written notice to the other party.

C. Immediate amendment or termination by COUNTY may occur under any of the following conditions:

1. Upon evidence of denial, revocation, suspension or non-renewal of any license or certificate required by law or regulation to be held by CONTRACTOR in order to provide the services required under this Contract.

[0024f p/15]

2. Upon evidence that CONTRACTOR has endangered or is endangering the health and safety of clients/residents, staff or the public.

3. If CONTRACTOR fails to start up services after date specified in this Contract, or if CONTRACTOR fails to continue to provide services for the entire Contract period.

4. If COUNTY funding from an applicable funding source is not obtained or is suspended, reduced or eliminated.

5. If, for any reason, the Agreements between COUNTY and funding sources for provision of emergency basic needs and community action services are terminated in whole or in part by the funding source.

6. Upon evidence of improper or illegal use of funds provided under this agreement.

7. Upon evidence of CONTRACTOR's financial or management instability which COUNTY deems sufficient to jeopardize customary level and/or quality of service.

8. If CONTRACTOR is suspended, debarred, proposed for debarment, declared ineligible or voluntarily excluded from participating in agreement or contract with any Federal department or agency.

D. Payment to CONTRACTOR shall be prorated and include the day of termination, and shall be in full satisfaction of all claims by CONTRACTOR against COUNTY under this Contract.

E. Termination under any provision of this section shall not affect any right, obligation, or liability of CONTRACTOR or COUNTY which accrued prior to such termination.

F. In the event of termination of this Contract, all finished or unfinished documents, data, studies, and reports purchased or prepared by CONTRACTOR under this agreement shall be returned to COUNTY within forty five (45) days of termination. CONTRACTOR may retain copies of all such material.

G. Upon issuance of the notice to terminate this Contract, COUNTY may require that all expenditures be suspended upon delivery of said notice and that any additional expenditures must have prior approval by COUNTY. CONTRACTOR shall be entitled to compensation for any unreimbursed expenses reasonably or necessarily incurred in satisfactory performance of this Contract, and within its approved work plan and approved budget, prior to receipt of a termination notice pursuant to this section; or if COUNTY does not require suspension of expenditures upon receipt of the termination notice, prior to the effective date of the termination.

H. Notwithstanding the above, CONTRACTOR shall not be relieved of its liability to COUNTY for damages sustained by COUNTY or funding source by virtue of any breach of this Contract by CONTRACTOR. COUNTY may withhold any reimbursement to CONTRACTOR for the purpose of compensation for damages until such time as the exact damages due to COUNTY from CONTRACTOR are agreed upon or otherwise determined.

XXV. Merger. This agreement constitutes the entire agreement between the parties and supersedes all prior written or oral discussions or agreements. No waiver, consent, modification or change in the terms of this agreement shall bind either party unless in writing and signed by both parties. Such waiver, consent, modifications or change, if made, shall be effective only in the specific instance and for the specific purpose given. There are no understandings, agreements, or representations, oral or written, not specified herein regarding this agreement.

CONTRACTOR, BY THE SIGNATURE BELOW OF ITS AUTHORIZED REPRESENTATIVES, HEREBY ACKNOWLEDGES THAT IT HAS READ THIS AGREEMENT, UNDERSTANDS IT, AND AGREES TO BE BOUND BY ITS TERMS AND CONDITIONS.

In witness whereof, the parties hereto have caused this Agreement to be executed by their authorized officers.

APPROVED:

STATE OF OREGON, ACTING BY AND THROUGH
THE STATE BOARD OF HIGHER EDUCATION ON
BEHALF OF PORTLAND STATE UNIVERSITY
P.O. BOX 751
Portland, OR 97207

MULTNOMAH COUNTY
DEPARTMENT OF HUMAN SERVICES
426 SW Stark, 5th Floor
Portland, OR 97204

By _____
C. William Savery
Vice-Provost
Date _____

By William B. Davis 11/27/89
Manager
Community Action Program
Office
Date _____

By _____
J. D. Kenton, Director
Office of Business Affairs
Date _____

By Gm McConnell omc 12-1-89
Director
Aging Services Division
Date _____

Gladys McCoy 12/21/89
Gladys McCoy, Chair
Multnomah County
Board of Commissioners
Date _____

REVIEWED:

LAURENCE KRESSEL
County Counsel for
Multnomah County, Oregon

By Laurence Kessel 12.7.89
Assistant County Counsel
Date _____

EXHIBITS

EXHIBIT A. APPROVED CONTRACTOR WORKPLANS

OCS Demonstration Partnership Program
OPIE Chronic Arrearages Demonstration Project

EXHIBIT B. APPROVED CONTRACTOR BUDGETS

RRI EVALUATION SERVICES BUDGET
OCS Demonstration Partnership Program Budget
OPIE Chronic Arrearages Demonstration Project

EXHIBIT C. COMPLIANCE WITH APPLICABLE LAWS, REGULATIONS, PLANS AND INSTRUCTIONS

Demonstration Partnership Program

EXHIBIT D. APPLICABLE CONTRACTS BETWEEN COUNTY AND FUNDING SOURCES

Office of Community Services Grant Award (OCS/DPP)
State Community Services Contract (OPIE Chronic Arrearages
Demonstration Project)

EXHIBIT E. ADDITIONAL CONTRACTOR CERTIFICATIONS AND ASSURANCES

Certification Regarding Debarment, Suspension and Other
Responsibility Matters
USDOE Assurance of Compliance with Nondiscrimination in Federally
Assisted Programs
USDHHS Certification Regarding Drug Free Workplace

EXHIBIT F. CERTIFICATES OF CONTRACTOR INSURANCE AND BONDING

Liability Insurance
Worker's Compensation

REVISED EVALUATION PLAN:
HOMELESS FAMILY SELF-SUFFICIENCY PROJECT

This document presents a revised evaluation plan for the Homeless Family Self-Sufficiency Project, a demonstration project to be conducted by Multnomah County, Oregon under a grant from the Office of Community Services, Family Support Administration, Department of Health and Human Services. While Multnomah County will provide overall administration of project activities, the delivery of services will be coordinated by a not-for-profit agency, Portland Impact, and the evaluation activities will be conducted by the Regional Research Institute for Human Services, Portland State University. The revisions in the evaluation plan are prompted by a review of the original proposal conducted by the Office of Community Services and its consultant, Macro Systems, Inc. These revisions reflect both comments and suggestions by reviewers as well as recent developments in the participating agencies' approach to conducting the project.

Evaluation Overview

The overall goal of the evaluation plan is to assess the effectiveness of combining intensive case management with integrated and comprehensive family services in an effort to improve the self-sufficiency of homeless families. This intervention strategy represents a new approach to the problems of homeless families and therefore carries both advantages and disadvantages. On the positive side, it offers the opportunity to address these problems in a creative way and one that is consistent with current thinking. Schorr (1989) suggests that programs that work are intensive, comprehensive, family and community based and provide staff with the time and skills needed to develop relationships of respectability and collaboration. We intend to incorporate these elements in the Homeless Family Self Sufficiency Program. On the negative side, the newness of the approach means that its parameters are not well established or even articulated and that it may be subject to pitfalls that are yet unknown or unanticipated. Under such circumstances, the evaluation component becomes particularly important, since replicability, accountability, and continued development all depend on a close scrutiny of what happens and what appears to result.

Since the approach is yet untested and, in some sense, evolving, a critical aspect of the evaluation will be a careful monitoring of process--the methods, procedures, and activities by which services are provided. This refers not only to the events that take place directly with project participants but also the events that constitute program development--staffing, training, and establishing partnerships among community service providers. The process evaluation will be done with an eye toward replicability, since the ultimate intent is to produce a model that can be used by other agencies in other settings to address similar problems.

Closely related to process evaluation is the issue of participant description, since much is still unknown about contemporary homelessness in families and the design of appropriate service programs depends on a careful understanding of who needs what. Therefore, evaluation activities will pay special attention to describing the types of families seeking services and will collect information on prior history, present circumstances, skills, deficits, and needs.

Finally, evaluation activities will focus on outcomes, that is, whether the intensive service approach improved the self-sufficiency of families in comparison to other

families receiving regular services. This comparison will be made in the context of a true experimental design and will utilize multiple dependent measures; that is, self-sufficiency will be treated as a multi-faceted concept and will be measured in a number of ways. The working definition of self-sufficiency, which will be refined further is as follows: a family that exhibits self-sufficiency is one that is able to function within the minimum norms of the community with regard to maintaining permanent shelter and income, reasonable family functioning, appropriate parenting practices, and demonstrates the ability to maintain an interdependent social support system and use this resource in times of crisis. The overall hypothesis is that the families who receive intensive case management and comprehensive services will demonstrate greater scores on the self-sufficiency measures at the end of the project than the control families. Specifically, families who receive intensive case management and comprehensive services will:

- (1) demonstrate a higher level of family and personal functioning,
- (2) have more stable housing at the end of the project,
- (3) have more economic self-sufficiency in the form of more stable employment and income, and
- (4) have a higher level of social support from resources such as friends, relatives, and community.

Each of the evaluation components pertaining to process, program participant description, and outcomes are discussed below in terms of objectives and corresponding measures.

Process Evaluation

The process evaluation will center around two broad themes, issues of program development and issues of intervention with project participants. Program development will include the process of getting the program organized, recruiting and selecting staff, developing and maintaining the resources needed to provide comprehensive services and the development and implementation of the evaluation procedures. Intervention with participants will include aspect of project participant recruitment and assignment to intervention or control groups, and delivery of services to participants.

Partnerships

Objective 1 Develop and maintain a minimum of twelve working agreements with organizations who will provide services to project participants in areas such as housing, financial assistance, medical, social, drug and alcohol treatment and basic needs.

Measures Maintain copies of formal working agreements on file at the Family Resource Center; document progress in developing these agreements and barriers and obstacles in the quarterly reports.

Objective 2 Develop informal working agreements with individuals, groups and organizations working with project participants.

Measures Describe in narrative form the informal working agreements with individuals, groups and organizations serving project participants; document process for developing these informal agreements and barriers and obstacles in the quarterly reports.

Staffing

Objective 3 Hire qualified project staff (probably four).

Measures Describe the hiring process, qualification sought, qualifications found and a critique of both the hiring process and the qualifications in the first quarterly report.

Objective 4 Provide all staff with a minimum of 20 hours of training prior to project start up. This training will include the areas of alcohol and drug assessment, domestic violence, community resources, state agency procedures for intake and criteria for services, skills of case management, cultural awareness and cross cultural competency, client empowerment and research and evaluation procedures.

Measures Describe the content and format of training in narrative form; critique effectiveness in first quarterly report.

Objective 5 Maintain a high rate of staff retention over the 16 months of the service delivery.

Measures Document staff turnover and steps taken to prevent turnover in quarterly reports.

Objective 6 Hold weekly case management meetings to discuss individual cases. Meetings will include case managers, project director, community experts and a representative from the evaluation team.

Measures Document dates, attendance and substance of meetings in quarterly reports.

Evaluation

Objective 7 Develop measurement tools and procedures for collecting data.

Measures Maintain copies of all forms that will be used to collect data. These will include agency forms (intake form, needs assessment, case plan, case narrative, termination form) as well structured interview schedules. Document procedures for collecting data and monitoring the reliability and completeness of the data. Describe problems and barriers in the quarterly reports.

Objective 8 Conduct a structured research interview with each program participant shortly after they come to the Center and again at about six months after termination from the project.

Measures Maintain a complete data base on each program participant, describe preliminary findings in summary as needed by the Center, document results and conclusions in a final report.

Intervention with Project Participants

Objective 9 Recruit and assign 75 project participants to intensive case management and 45 project participants to regular services with a target date of January 1, 1990.

Program participants who meet the following criteria will be invited to be a part of the research and demonstration project. Participants must be homeless, must have an income of 125% of the federal poverty guideline or below, must be living in a family unit (couples, pregnant women, parents with children), and must be 18 years old or older.

Participants will be excluded if they display violent behavior or are chronically mentally ill. All project participants must be willing to participate in case management including drug and alcohol treatment when indicated.

Measures Numbers of project participants recruited and assigned will be documented in the quarterly reports. The procedures used and barriers overcome will also be described.

Objective 10 The project will maintain a Family Resource Center that will provide access to a case manager and to integrated and comprehensive family services.

The Family Resource Center currently provides a day shelter and access to community services through a small case management staff. Additional services will be developed and some will be co-located at this neighborhood site. The Center is accessible year round.

Case management services will be provided to all participants, however, 75 project participants will receive intensive case management. Intensive case management will be made possible by assigning these cases to three case managers and keeping the case loads low. The remaining forty-five project participants will receive case management consistent with the current level of services. This group of participants will be assigned to one case manager.

Program participants receiving intensive case management will also have access to special services including transitional housing and the use of stipend monies to help project participants with rent; on site employment services, access to the social networks being developed by the Volunteer Coordinator and Director; a specially designed needs assessment; and access to the Self Esteem program which will be offered at the Center.

Those project participants receiving regular case management services will have access to the currently available services which include two to four weeks of emergency housing, transitional housing if available, and employment services as available through other community programs. The currently offered case management is crisis oriented and not on-going.

Portland Impact intends to develop and maintain a computerized Management Information System for participant tracking, with particular emphasis on intake data.

Measures The amount and type of services each program participant receives will be recorded in the case records and monitored by evaluation staff. The issues that arise around providing appropriate and comprehensive services through case management will be described in each quarterly report.

Client Description

Program participants will be interviewed shortly after intake by a member of the evaluation staff. The interview will cover prior history and current family circumstances, including family structure, responsibilities, resources, and needs. .PA

The interview will also assess self-sufficiency in four areas: personal and family functioning (including parenting), shelter, employment and other kinds of income, and social support systems. The latter measures will also be used as outcome measures and are discussed in more detail in that section. This information will be summarized into a composite profile which will describe the families who are participants in the project.

Outcome Evaluation

The assessment of intervention effectiveness will be tested with an experimental design whereby homeless families will be randomly assigned to either the intensive case management condition (intervention group) or a group receiving typical services (control group). In neither group will families be denied services that would normally be received; therefore, ethical constraints concerning withholding services do not apply. Families will be assigned to groups with the intention of achieving 75 intervention families and 30 control families at the end of the project. Given the likelihood of attrition in the control group, current plans call for assigning 40 to 50 families to this group at the beginning of the project, with the hope that at least 30 will be available for a final interview at the end. As an incentive to remain in the project, participating families will be offered a payment of \$20 for the second interview. Attrition is likely to be less of a problem in the intervention group because of the intensity and quantity of services that will be available to them.

The use of random assignment is judged to be feasible because the agency, Portland Impact, is of sufficient size that the entire project can take place within this one setting. In addition, this agency is committed to the concept of evaluating new models of service delivery, and staff have been introduced to the possibility of research involvement. Plans call for conducting training sessions to familiarize staff with the research and gain their cooperation.

The dependent variables to be used are measures of personal and family functioning, housing adequacy, economic status including employment, and social support resources. The operational definitions of these measures are still being developed, although it is anticipated that existing measures and definitions will be used whenever possible to permit some level of comparability with other studies.

On a preliminary basis, personal and family functioning is defined as the capacity of the family and its members to carry out their responsibilities both to themselves and to others. Included here are activities concerned with maintaining good mental, physical, and emotional health, rearing children, and maintaining a household. A number of established family functioning measures are available to measure some facets of these activities, and the initial efforts of the project will be directed toward choosing measures and developing whatever additional measures are needed to fill in the gaps.

Housing adequacy is defined on a continuum from true homelessness to having stable shelter; in between these two endpoints are a number of steps, including overnight shelters and transitional housing. Operationally, stability of housing will be defined as a family moving no more than once during the year after leaving ninety (90) day transitional housing.

Economic self-sufficiency is defined by the acquisition of adequate income, preferably through permanent employment. Again this will be measured with a series of graduated steps, with the end criteria being at least one adult family member having a full-time job three months after project completion that pays sufficiently to cover the family's expenses. Realistically, though, public welfare or AFDC support may be the most appropriate source of income for some families, so the scaling will have to reflect this type of support as a reasonable goal. At the outset, an employability assessment tool will be used to determine the gradation toward economic self-sufficiency. Social support resources are defined on the basis of a family's social network, including friends, relatives, and community groups. The notion here is that families who are not isolated but rather who have interdependent sources of emotional and informational support will

be better able to achieve self-sufficiency. Existing social network scales will be evaluated for inclusion in the study.

All measures will be obtained in the context of a structured interview. A standard interview procedure will be developed, and interviewers will be trained in the consistent use of this procedure. Measures will be taken soon after intake and again about one year later.

Analyses

Both qualitative and quantitative analyses will be used in this evaluation. The process evaluation will qualitatively examine the circumstances of program development and service delivery in an effort to develop some refined principles that might be applied in other settings. For example, the process of developing partnerships among various community agencies can be complex and difficult, but an examination of this process from the standpoint of things done right and things worthy of improvement can be very valuable. Such an examination can only be done qualitatively and with an approach that allows maximum richness of description. In a sense, the evaluator's task is to play Boswell to a series of unfolding events that can take many different turns.

The process evaluation will also have a quantitative side in that statistics will be maintained and compiled on the types of services delivered. This is especially important since the type and mix of services will be driven by families' needs and not by predetermined program design. Thus, in describing what occurred in the program, a profile of service utilization can be presented in a way that reflects program responsiveness as well as service demands. At this point, the statistical analysis to be done on the process data is expected to be largely descriptive. Some correlational analyses may be possible, for example, linking certain participant characteristics to certain types of services or service patterns. However, these analyses will likely be limited by small sample sizes, and, in any event, they will be secondary to the major task of describing in a concise way what occurred in the program.

Like the process evaluation, the description of participants will also be both qualitative and quantitative. The family profiles will serve as a means of presenting quantitative information such as age, number of family members, income, years without stable housing, and so forth, while other descriptive formats such as case histories will be used to provide a more qualitative picture of project participants. While the sample for this project may or may not be representative of contemporary homeless families, the participant descriptions will help to improve current understanding of such families and possibly dispel some popular notions about them and their circumstances.

The analyses for the outcome evaluation will be primarily quantitative and will be based on testing differences between the intervention and control groups. Since the intent is to use continuous variables whenever possible, the analyses will test mean differences, likely with analysis of covariance procedures using the pretest measures as covariates. In essence this is equivalent to a series of t-tests for independent samples with the dependent measures (post-tests) adjusted on the basis of the corresponding pretests. The statistical approach taken here will, for the most part, be univariate (one dependent variable per test), although some exploratory analyses may be done using multivariate dependent variables. For example, the main components of the self-sufficiency scale, those dealing with family functioning, housing, economic status, and social networks, may be treated as a multivariate dependent variable in an effort to examine if they jointly differentiate the intervention and control groups. Multivariate analyses such as these, however, require fairly large samples, so the feasibility of such analyses will depend on what is available at the end of the project.

In those instances where variables cannot be measured on a continuous basis, other statistical procedures for testing differences will be used. For example, nominal level variables will likely be tested using chi-square tests. Also, some data may be re-scaled to address the needs of specific audiences. In the most likely case, continuous variables that are normally expressed as means can be re-scaled to percentages, at the cost of some precision, in order to make results more readily understandable. As an example, a measure of housing adequacy which is collected and analyzed as a continuum can be re-scaled in terms of a particular point, say, percentage of the treatment and control groups who achieve stable housing at the end of the project.

Reference

Schorr, L.B. (1989) Within Our Reach: Breaking the Cycle of Disadvantage. Doubleday: New York.

RRI PROPOSED BUDGET:
SUBCONTRACT ON CHRONIC ARREARAGE PILOT PROJECT

The Regional Research Institute for Human Services (RRI), Portland State University proposes to conduct the evaluation component of the Chronic Arrearage Pilot Project. The scope of evaluation activities is based on preliminary discussions about the Project and a current consensus about the evaluation design (see attachment). Briefly, the RRI's tasks in the evaluation would be the following:

- (1) Preliminary consultation and discussions regarding evaluation design (10 hours).
- (2) Joint development of questionnaire measures in cooperation with staff (16 hours).
- (3) Initial setup of research procedures including random assignment method (16 hours).
- (4) Monthly meetings and phone calls for monitoring progress (48 hours {based on 4 hours per month}).
- (5) statistical analysis of data, including any necessary data verification; transformation; and scale-development. (50 hours)
- (6) preparation of written summary of results for final report (40 hours)
- (7) participation in 2 presentations to discuss findings (5 hours)
- (8) additional activities such as data transfers, gaining familiarity with PRISM computer software, material preparation for presentations, etc. over the length of the project (35 hours)

Estimated total time is 220 hours. Based on RRI's standard consulting rate to agencies of \$35/hour, the cost of these activities will be \$7700. In addition, computer activities will require approximately 100 hours of RRI microcomputer time. Billed at the standard project rate of \$3.00 per hour, this will cost an additional \$300. Total cost of RRI activities will be \$8000.

Evaluation-related activities to be done by the project include data collection, data entry, and supplying the final data set to RRI for analysis. If needed, RRI will provide specifications for file and record structures to facilitate the transfer of data.

EXHIBIT "B"

PORTLAND STATE UNIVERSITY
PROPOSED BUDGET
OPIE PROJECT and DEMONSTRATION PARTNERSHIP PROGRAM GRANT
BUDGET PERIOD: 7/1/89 - 6/30/90

	DEMONSTRATION PARTNERSHIP 7/89 - 6/90	OPIE PROJECT 7/89 - 3/90	TOTAL PROJECT BUDGET
<u>SALARIES AND WAGES</u>			
KOROLOFF, Nancy; Principal Investigator			
9/1/89 - 9/15/89 @ 0.11 FTE <\$33,579 / 9 Mos.>	205.00		205.00
9/16/89 - 6/30/90 @ 0.11 FTE <\$35,595 / 9 Mos.>	4,133.00		4,133.00
KOREN, Paul; OPIE Project Coordinator			
7/1/89 - 3/31/90 @ 0.16 FTE <\$38,028 / 12 Mos.>		4,563.00	4,563.00
LEBOW, Wendy; Research Assistant			
9/1/89 - 6/30/90 @ 0.50 FTE <\$25,008 / 12 Mos.>	10,420.00		10,420.00
TO BE NAMED; Interviewer <Student Hourly Wages>			
330 Hours @ \$7.50/hour	2,475.00		2,475.00
TO BE NAMED; Coding & Clerical <Student Hourly Wages>			
680 Hours @ \$5/hour	3,400.00		3,400.00
Total Salaries and Wages	20,633.00	4,563.00	25,196.00
<u>FRINGE BENEFITS</u>			
Faculty: 32% of Total Salaries & Wages	4,722.00	1,460.00	6,182.00
Student: 05% of Total Salaries & Wages	294.00	0.00	294.00
Total Salaries & Wages	5,016.00	1,460.00	6,476.00
Total Personnel Costs	25,649.00	6,023.00	31,672.00
<u>TRAVEL</u>			
Interviewer ==> Mileage: 1,905 Miles @ \$0.21/mi.	400.00		400.00
Director's Meeting in Washington, D.C.	975.00		975.00
Total Travel	1,375.00	0.00	1,375.00
<u>SUPPLIES</u>			
Office Supplies	500.00		500.00
Tape Recorders and Tapes	270.00		270.00
Total Supplies	770.00	0.00	770.00
<u>OTHER DIRECT COSTS</u>			
Telephone	351.00		351.00
Duplicating / Copying / Reproduction Costs	760.00	333.00	1,093.00
Computer Usage Time	550.00	600.00	1,150.00
Total Other Direct Costs	1,661.00	933.00	2,594.00
TOTAL DIRECT COSTS	29,455.00	6,956.00	36,411.00
INDIRECT COSTS - 15% of Total Direct Costs	4,418.00	1,044.00	5,462.00
TOTAL COSTS	33,873.00	8,000.00	41,873.00

EXHIBIT C

COMPLIANCE WITH APPLICABLE LAWS, REGULATIONS, PLANS, AND INSTRUCTIONS

DEMONSTRATION PARTNERSHIP PROGRAM FUNDS

CONTRACTOR shall insure that all services which are funded under this contract by Demonstration Partnership Program (DPP) funds are performed by CONTRACTOR in compliance with the following federal laws, regulations, plans and instructions:

Section 408 (a) (1) of the Human Services Reauthorization Act of 1986

Section 652 and 673 (2) of the Omnibus Budget Reconciliation Act of 1981

45 CFR 16 - Department Grant Appeals Process

45 CFR 74 - Administration of Grants

45 CFR 75 - Informal Grant Appeal Procedures

45 CFR 76 - Debarment and Suspension from Eligibility for Financial Assistance

45 CFR 80 - Non-discrimination Under Programs Receiving Federal Assistance through the Department of Health and Human Services

45 CFR 81 - Practice and Procedures for Hearings under Part 80

45 CFR 83 - Non-discrimination on the Basis of sex in the admission of individuals to training programs

45 CFR 84 - Non-discrimination on the Basis of Handicap in Programs

45 CFR 91 - Non-discrimination on the Basis of Age in Health and Human Services Programs or Activities Receiving Federal Financial Assistance

45 CFR 92 - Uniform Administrative Requirements for Grants and Cooperative Agreements to States and Local Governments (March 11, 1988)

45 CFR 100- Intergovernmental Review of Department of Health and Human Services Programs and Activities

Chapter 6-150 HHS Grants Administration Manual, HHS Transmittal 87.01 (6/12/87) pertaining to indirect cost reimbursement

Secretary of Health and Human Services annual Poverty Income Guidelines

DEPARTMENT OF HEALTH & HUMAN SERVICES

Family Support Administration

NOTICE OF GRANT AWARD

Under authority of P.L. 99-425, Section 408(a)(1)

This grant is subject to the terms and conditions incorporated either directly or by reference in:

- a. Grant Program Legislation cited above
- b. Grant Program Regulations cited above
- c. Special Terms and Conditions, if any, noted below
- d. 45 CFR Part 74 and Part 92

1. DOCUMENT NO 891DPOR220	CFDANC 13.797
2. GRANT NO 89-1-DP-OR-220	3. AMEND NO
4. BUDGET PERIOD FROM 7-01-89 THROUGH 6-30-91	
5. TOTAL PROJECT PERIOD FROM 7-01-89 THROUGH 6-30-91	
6. TYPE OF GRANT <input type="checkbox"/> CONTINUATION <input type="checkbox"/> SUPPLEMENT <input type="checkbox"/> REVISION FOR () <input checked="" type="checkbox"/> NEW <input type="checkbox"/> COMPLETING EXTENSION	

7. PROJECT/PROGRAM TITLE

Demonstration Partnership Program

8. GRANTEE ORGANIZATION

Multnomah County Department of
Human Services
426 S.W. Stark, 7th Floor
Portland, Oregon 97204

9. PRINCIPAL INVESTIGATOR OR PROGRAM DIRECTOR

William B. Thomas
(503) 248-3782

10. APPROVED BUDGET

GRANT FUNDS ONLY <input checked="" type="checkbox"/>	TOTAL PROJECT COSTS <input type="checkbox"/>
PERSONNEL	\$
FRINGE BENEFITS	
TRAVEL	1,100
EQUIPMENT	
SUPPLIES	
CONTRACTUAL	242,838
OTHER	4,000
.....	
.....	
.....	
DIRECT COSTS	\$ 247,938
INDIRECT COSTS	2,062
Calculated at .7 % of \$ 242,838	
7.1% \$ 5,100	
TOTAL APPROVED BUDGET	\$ 250,000

12. CONGR. DISTRICT

3rd

13. COUNTY

Multnomah

14. AWARD COMPUTATION

A. TOTAL APPROVED BUDGET	\$ 250,000
B. LESS	\$ -0-
C. LESS UNOBLIGATED BALANCE FROM PRIOR BUDGET PERIOD(S)	\$ -0-
D. TOTAL AMOUNT AWARDED THIS BUDGET PERIOD	\$ 250,000

15. AMOUNT AWARDED—THIS ACTION

\$ 250,000

16. TOTAL FEDERAL FUNDS AWARDED

TO DATE FOR PROJECT PERIOD

17. SUPPORT RECOMMENDED FOR REMAINDER OF PROJECT PERIOD

PERIOD

TOTAL DIRECT COSTS

No further financial support of this
project is anticipated by OCS.

11. REQUIRED GRANTEE PARTICIPATION
To match Federal approved budget with
\$250,000 in private or public funds.

18. REMARKS (SPECIAL TERMS & CONDITIONS ATTACHED ☒ YES ☐ NO)19. PAYMENT INFORMATION PAYMENTS UNDER THIS AWARD WILL BE MADE UNDER PAYMENT CLAUSE a AS EXPLAINED ON REVERSE.

20. INQUIRIES REGARDING ADMINISTRATION OF THIS GRANT SHOULD BE DIRECTED TO:

Jacqueline G. Lemire

OR

Anna Thornton

(OCS PROJECT OFFICER)

(FSA GRANTS MANAGEMENT SPECIALIST)

21. FY CAN

9G854007

APPROP. NO.

7591504

22. CRS/EIN/PIN 2015

1-936002309-A7

23. SIGNATURE AND TITLE—FSA OFFICIAL

Michael L. Friedman

DATE

Associate Administrator for
Financial Management

23. OBJECT CLASS

41.51

24. FSA LIST NO.

DDG-89-50

DEPARTMENT OF HEALTH AND HUMAN SERVICES
FAMILY SUPPORT ADMINISTRATION

OFFICE OF COMMUNITY SERVICES
DEMONSTRATION PARTNERSHIP PROGRAM

STANDARD TERMS AND CONDITIONS

This award is subject to the following terms and conditions.

Failure to comply with any of the following terms or conditions shall, in accordance with Title 45 CFR Part 74, Subpart M (non-governmental), and 45 CFR Part 92, Subpart C (state and local governments), be considered grounds for suspension and/or termination of this grant.

1. The application budget and narrative as submitted requiring any amendments or revisions must receive prior approval.

2. LEGAL AUTHORITY

All grants made to applicants under Announcement No. OCS 89-3 are subject to the provisions of Section 408(a)(1) of the Human Services Reauthorization Act of 1986. Funds awarded must be expended in accordance with the approved work program and for the demonstrable benefit of low-income people, as defined in the latest annual revision of the poverty income guidelines published by the Secretary of Health and Human Services, as required by Sections 652 and 673(2) of the Omnibus Budget Reconciliation Act of 1981. Unless some other proportion is explicitly approved by the Director, Office of Community Services (OCS), or is required by technical or skill considerations, all jobs created through the implementation of the approved work program must be filled by low-income people, as defined in the latest annual revision of the above-referenced poverty income guidelines. The employment of low-income people, and best efforts to employ them when filling grant-supported jobs, must be documented in each program progress report.

3. Title 45 of the Code of Federal Regulations:

- Part 16 - Department Grant Appeals Process
- Part 74 - Administration of Grants (non-governmental)
- Part 74 - Administration of Grants (state and local governments and Indian Tribal affiliates):
 - Sections 74.62(a) Non-Federal Audits
 - 74.173 Hospitals
 - 74.174(b) Other Nonprofit Organizations
 - 74.304 Final Decisions in Disputes
 - 74.710 Real Property, Equipment and Supplies
 - 74.715 General Program Income
- Part 75 - Informal Grant Appeal Procedures
- Part 76 - Debarment and Suspension from Eligibility for Financial Assistance

- Part 80 - Non-discrimination
Under Programs Receiving Federal Assistance through
the Department of Health and Human Services
Effectuation of Title VI of the Civil Rights Act of
1964
- Part 81 - Practice and Procedures for Hearings Under Part 80
of this Title
- Part 83 - Nondiscrimination on the basis of sex in the
admission of individuals to training programs
- Part 84 - Non-discrimination on the Basis of Handicap in
Programs
- Part 91 - Non-discrimination on the Basis of Age in Health and
Human Services Programs or Activities Receiving
Federal Financial Assistance
- Part 92 - Uniform Administrative Requirements for Grants and
Cooperative Agreements to States and Local Governments
(Federal Register, March 11, 1988)
- Part 100- Intergovernmental Review of Department of Health and
Human Services Programs and Activities

4. DEMONSTRATION PARTNERSHIP EVALUATION WORKSHOP

- a. Within 30 days of the effective date of this grant, the grantee will submit to the Office of Community Services the name and qualifications of the third-party evaluator.
- b. The grantee's Project Director and third-party evaluator will attend an evaluation workshop, to be held in Washington, DC at a date to be announced by the Office of Community Services, and will be expected to make brief presentations. The grantee is requested to utilize the flexibility provided in the approved project budget to finance the costs of the trip or, if necessary, to utilize for this purpose other resources that may be available.
- c. Within 15 days of the above mentioned workshop, the grantee, taking into account the discussions and recommendations referred to above, must submit for approval to the Family Support Administration, Office of Community Services, a final evaluation plan to be used in the third-party evaluation of the project. The evaluation plan must yield, with as much certainty as possible, the extent to which planned interventions produced the intended outcomes. The evaluation must include procedures that compare information about participants and non-participants and be able to isolate and systematically assess competing explanations for the outcomes. The plan should clearly state the hypothesis and the appropriate definitions, interventions, outcome-oriented objectives and performance measures.

The plan should contain specification of the following elements:

(1) the program performance measures to be used (program performance indicators, data sources, data collection methods, data collection instruments, sampling design and sample size); (2) the comparisons to be made (quasi-experimental or experimental designs); (3) the intended uses of program performance information (data analysis plan, statistical tests, etc.); (4) the resources to be committed to data collection and data analysis; and (5) the work plans and schedules for data collection and analysis.

5. SECTARIAN ACTIVITIES

Grantee assures that no portion of any property or facility acquired or renovated in whole or in part with funds awarded or otherwise acquired pursuant to this grant will be used for religious worship, sectarian instruction or any other religious purpose.

6. INDIRECT COST REIMBURSEMENT

Grants awarded are subject to indirect cost reimbursement in accordance with Chapter 6-150 of the HHS Grants Administration Manual, HHS Transmittal 87.01 (6/12/87).

NOTE: The policies pertaining to reimbursement of indirect costs have changed. Major changes include, but are not limited to, the following points: (a) The total amount awarded (direct plus indirect) shall constitute a ceiling on the amount payable to the grantee for a grant; (b) If additional funds are available, a grant shall be amended for specified exceptions only; and (c) Some prior approval requirements for rebudgeting between direct and indirect costs (in either direction) have been waived.

Additional information may be found in the Federal Register, June 12, 1987, pages 22530-22533.

7. INTEREST

See 45 CFR Part 74, Section 74.47 (non-governmental) or 45 CFR Part 92, Section 92.21(i) (state & local governments and Federally recognized Indian Tribes) regarding regulations governing interest.

8. GRANT RELATED INCOME

Income related to activities supported by this grant, as described in Title 45 of the Code of Federal Regulations, is subject to the provisions of the following: Part 74, Sections 74.42 and 74.46 of Subpart F (non-governmental) and Part 92, Section 92.25 of Subpart C (state & local governments and Federally recognized Indian Tribes).

9. LOBBYING

No funds committed to this program shall be used to engage in lobbying or other activities intended to influence legislation.

10. ADVOCACY

No funds committed to this program shall be used directly or indirectly for advocacy of a particular party, candidate, or political program, whether partisan or nonpartisan.

11. AUDIT REQUIREMENTS

Financial and compliance audits should be performed, and auditors reports prepared, in accordance with the General Accounting Office (GAO) "Standards for Audit of Governmental Organizations, Programs, Activities and Functions", 1981 revision.

Chapters V.B.2 and VII.D and E of the standards cover reporting requirements. Your attention is especially directed to the following information to be presented in audit reports: (i) a statement in the auditors' scope that the examination was made in accordance with generally accepted Government auditing standards for financial and compliance audits; (ii) statements of positive assurance on items tested for compliance and negative assurance on items not tested; (iii) identification of the major deficiencies disclosed; (iv) presentation of the auditors' explanation of the rejection of any invalid response; (v) disclosure of the status of prior recommendations; and (vi) placing findings in proper perspective by relating the extent of noncompliance to the number of cases examined. It would also be helpful if the auditors presented comments on the accuracy and completeness of your financial reports and claims submitted to the Federal Government. Audits of grants to Government agencies should be performed and reports prepared in accordance with the requirements of Appendix J (Circular A-128) to the Office of Management and Budget (OMB) Circular A-102.

12. DISCLAIMER TO BE INCLUDED IN ALL PUBLICATIONS/VIDEOS/ANNOUNCEMENTS

All published material, videos, and announcements should include the following disclaimer:

"This (publication/video) was developed under a grant from the Department of Health and Human Services, Office of Community Services. However, the contents do not necessarily represent the policy of the Department of Health and Human Services and you should not assume endorsement by the Federal government unless so granted."

13. REPORTS

(a) IDENTIFICATION AND ADDRESS

The OCS grant award number must be included on all required reports and on all grant related correspondence.

GENERAL CORRESPONDENCE

Except for the reports listed on page 4, all correspondence relating to your grant should be directed to the Director, Office of Community Services, 370 L'Enfant Promenade SW, Washington, D.C. 20447. A copy should be sent to the Deputy Associate Administrator, Office of Grants Management, Mail Stop OFM/DGM, 370 L'Enfant Promenade, SW, Washington, D.C. 20447.

FINANCIAL AND PROGRAM PROGRESS REPORTS

The required financial and program progress reports, as mandated by the terms and conditions of your grant, must be submitted to the Family Support Administration, Office of Grants Management, Mail Stop OFM/DGM, 370 L'Enfant Promenade, SW, Washington, D.C. 20447.

A copy of the reports should also be forwarded to Family Support Administration, Chief, Demonstration Partnership Program, Office of Community Services, 5th Floor, 370 L'Enfant Promenade, SW, Washington, D.C. 20447.

(b) TIMELY SUBMISSION OF REPORTS

Failure to submit reports when due will constitute noncompliance with grant terms and may be considered inadequate performance relative to eligibility for future funding.

(c) QUARTERLY PROGRESS REPORTS

The grantee shall provide two (2) copies of quarterly progress reports pertaining to and describing this program and its performance and showing how this performance is related to the accomplishment of the objectives of the grant. The reporting format should include at the minimum a narrative covering all of the areas described in the work program. Grantee shall include in each report an analysis of its progress toward the accomplishment of the approved major and minor areas of work and milestones and shall explain any variance. Grantee shall report to OCS all material contracts entered into during the prior period in its quarterly report. Progress reports are due 30 days after the end of each three-month period of the grant.

(d) FINAL PROGRESS REPORTS

Within 90 days after the expiration date of this grant, the grantee shall provide OCS with two copies of a final report which summarizes the operation of the project supported by this grant and sets forth, in detail, how the project's operation related to the objectives set forth in the approved grant.

(e) PROJECT EVALUATION

The evaluation component which was a requirement under OCS Program Announcement 89-3 is to be adhered to, and the methods and results of its implementation are to be reported in both (c) and (d) above.

(f) REPORTS OF PROGRAM CHANGES

The grantee must formally report on any changes or amendments to its approved work plan and must request approval for any amendments that relate to slippage in time, changes in priorities, major expenditure modifications in the budget or significant changes or modifications of its approved personnel structure, including changes resulting from funding by OCS at a level lower than that requested in the above-referenced application. These reports and requests must be at the same level of detail as, and explicitly referred to, the related material appearing in the approved application.

These reports and requests should be mailed simultaneously to the offices listed on the previous page.

(g) FINANCIAL REPORTS

The grantee must submit on a semi-annual basis an original and two copies of Standard Form 269. Instructions for completing this form are on the back of the form. Reports are due 30 days after the end of each six (6) month budget period of the grant. A final Financial Status Report is due 90 days after the end of the funding period. This report must be signed by the grantee's Financial Officer, or by an individual designated by the Financial Officer; such designations must be written, signed by the grantee's Financial Officer and the grantee's Project Manager, and be submitted to the Office of Grants Management, FSA at the previously listed address.

14. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

Newly effective regulations require that all Federal grant recipients certify that they will maintain drug-free workplaces. In accepting this award, the grantee agrees to be bound by the certification standards. See the attachment labeled: U.S. Department of Health and Human Services' Certification Regarding Drug-Free Workplace Requirements for Grantees Other Than Individuals.

NOTE: For your information, the U.S. General Accounting Office maintains a toll free telephone number, 800-424-5454, for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Such reports are kept confidential, and callers may decline to give their names if they choose to remain anonymous.

CONTRACT NUMBER 90-50847

AGREEMENT FOR THE DELEGATION OF FUNDS

BETWEEN

OREGON STATE COMMUNITY SERVICES
 Department of Human Resources
 (hereinafter referred to as SCS)

and

MULTNOMAH COUNTY DEPARTMENT OF HUMAN SERVICES
 (hereinafter referred to as SUBGRANTEE)

By this agreement and all the attachments and exhibits, SCS delegates to SUBGRANTEE the following sums for the following periods subject to the following conditions and requirements.

SCS Program

<u>FFY</u>	Admin	Program	From	To	Cost Center
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DEPARTMENT OF AGRICULTURE (USDA)

Rural Housing Preservation Grant (RHPG)

Tribal Commodity Food Program (TCFP)

Temporary Emergency Food Assistance Program (TEFAP)

Commodity Supplemental Food Program (CSFP)

HEALTH & HUMAN SERVICES (HHS)

Low-Income Energy Assistance Program (LIEAP)					
89	\$29,991	\$359,891	7/1/89	12/31/89	641-1-20-12-47-89

Low-Income Energy Assistance Program Weatherization (LIEAP WX)

89	29,991	359,891	7/1/89	12/31/89	641-1-20-12-47-89
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<u>FFY</u>	<u>Admin</u>	<u>Program</u>	<u>From</u>	<u>To</u>	<u>Cost Center</u>
89	\$53,710	Community Services Block Grant (CSBG)	7/1/89	6/30/90	641-1-20-12-41-89
		Community Services Block Grant - LIEAP Transfer (CSBG-TFR)			
90	\$ -0-	Community Services Block Grant Homeless (CSBG-HOMELESS)	7/1/89	6/30/90	641-1-20-12-50-90
		Community Food and Nutrition Program (CFNP)			

HOUSING & URBAN DEVELOPMENT (HUD)

90	\$ -0-	Emergency Shelter Grant Program (ESGP)	7/1/89	6/30/90	641-1-20-11-50-90
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DEPARTMENT OF ENERGY (DOE)

90	\$16,112	Department of Energy Weatherization (DOE Wx)	7/1/89	3/31/90	641-1-20-13-47-90
90	\$ -0-	Department of Energy Training and Technical Assistance (DOE T/TA)	7/1/89	3/31/90	641-1-20-13-48-90

DEPARTMENT OF EDUCATION (DOED)

Fund For Improvement of Post Secondary Education (FIPSE)

PETROLEUM VIOLATION ESCROW FUNDS

89	\$ -0-	Oregon Partners in Energy (OPIE)	7/1/89	10/31/90	641-1-20-16-65-89
		Petroleum Violation Escrow Fund Weatherization (PVE WX)			
		Petroleum Violation Escrow Training and Technical Assistance (PVE T/TA)			
		Summer Youth Employment Program (SYEP)			

FFY	Admin	Program	From	To	Cost Center
OTHER					
State Homeless Assistance Program (SHAP)					
90	\$19,586	\$530,414	7/1/89	6/30/90	831-1-20-25-50-90

State Legalization Impact Assistance Grant (SLIAG)

The amount of delegated funds identified above as "admin" for any program is the maximum amount of the funds delegated herein that SUBGRANTEE may use for administrative costs. SUBGRANTEE may use any or all of the "admin" funds for program costs, but no "program" funds may be used for administrative costs.

1. Work to be Performed. SUBGRANTEE shall perform in a satisfactory manner the work plan for each SCS program for which funds are delegated under this agreement. These work plans are attached hereto as Exhibits A and by this reference made a part hereof. SUBGRANTEE shall perform all activities in accordance with the approved work plans, the approved budget(s), and terms of this agreement.

2. Budgets and Payments.

- A. SCS certifies that sufficient funds are available and authorized for expenditure to finance this agreement as indicated, provided, however, that continuation of this agreement, or any extension, after the end of the biennium in which it is written, is contingent upon funds being made lawfully available for the succeeding period.
- B. SUBGRANTEE shall provide a separate budget for each SCS program for which funds are delegated under this agreement. These budgets shall be in the format and shall contain all information requested by SCS. The budget summaries, for each program, attached hereto as Exhibits B and by this reference made a part hereof, shall separately allocate the total funds delegated under this agreement for each program to each of the line item categories specified therein. SUBGRANTEE shall make no changes between line item categories as shown in budget summaries (Exhibit B) without written approval of SCS.
- C. SCS shall pay to SUBGRANTEE 10% of the funds herein delegated for each program upon the signing of this agreement. Thereafter, SUBGRANTEE shall receive reimbursement from SCS based upon SCS's receipt and approval of the "Request for Cash" form filed by SUBGRANTEE pursuant to Section 4 hereof. Approval shall only be given if all reports required or requested under this agreement have been received by SCS. Approval will normally take ten (10) working days.

- D. SCS may withhold all payments due to SUBGRANTEE under this agreement or any other contract or agreement in effect between SCS and SUBGRANTEE if SUBGRANTEE violates any provision of this agreement including, but not limited to:
- (a) submission of complete, accurate and timely program, audit, or financial reports;
 - (b) compliance with federal audit standards;
 - (c) repayment of disallowed costs.
- E. Upon review of the quarterly reports filed by SUBGRANTEE pursuant to Section 4 hereof, SCS may adjust the amount of funds delegated to SUBGRANTEE for any program(s) covered by this agreement upward or downward to reflect the actual or anticipated expenditure of funds.
- F. Additional program-specific limitations or conditions on the use of funds are contained in Exhibits C attached hereto and by this reference made a part hereof.

3. Records.

- A. SUBGRANTEE and its subcontractors shall prepare and maintain such records as necessary for performance of the approved work plan and for compliance with the terms of this agreement.

SCS, the Secretary of State's Office of the State of Oregon, the federal government and the duly authorized representatives of such entities shall have free access to the books, documents, papers, audits and records of SUBGRANTEE and its Subcontractors which are directly pertinent to this agreement for the purpose of making audit, examination, excerpts, and transcripts. These records are the property of SCS which may take possession of them at any time with three business days' notice to SUBGRANTEE. SUBGRANTEE may retain copies of all records taken by SCS under this section.

- B. All books, documents, papers, or other records, including but not limited to client records, income documentation, financial records, invoices and statistical records, and supporting documents pertinent to this agreement shall be retained by SUBGRANTEE and its subcontractors for three years after final payment is made under this agreement or three years from the date of completion of any audit pursuant to Section 7 hereof, whichever is later. If, however, any audit questions remain unresolved at the end of this three-year period, all records must be retained until final resolution. Records involving matters in litigation shall be kept no less than one year after resolution of all litigation, including appeals.

4. Reports.

- A. SUBGRANTEE shall submit timely, complete and accurate reports to SCS detailing the progress made toward the program objective(s) as detailed in work plan and including all administrative and program expenditures.

Such reports shall be submitted for each SCS program for which funds are delegated under this agreement so that they are received by SCS on or before the due dates specified in Exhibit D attached hereto and by this reference made a part hereof. The reports shall be in the format and contain the information requested by SCS. The reports must agree with the accounting records maintained by SUBGRANTEE and/or its subcontractors and be certified by the chief executive officer of SUBGRANTEE, and its subcontractors if applicable.

All final reports shall be submitted by SUBGRANTEE so as to be received by SCS on or before the 60th day following the last day of the program period for that program, or the date that all activities funded by this agreement for that program are completed, whichever is earlier.

- B. SUBGRANTEE shall prepare and furnish such plans, work plans, data, descriptive information and reports as may be requested by SCS as needed to comply with state or federal requirements. SUBGRANTEE agrees to, and does hereby grant SCS the right to reproduce, use, and disclose all or any part of the plans, reports, data, and technical information furnished to SCS.

5. Fiscal Management.

- A. SUBGRANTEE and its subcontractors shall prepare and maintain accurate financial records documenting all expenditures made from funds delegated under this agreement. These records shall include adjustments to reconcile the accounting records, the financial reports to SCS and the audit report for the common accounting period.
- B. Expenditures of SUBGRANTEE and/or subcontractors may be claimed under this agreement only if they are: 1) in payment of eligible activities or services performed under this contract in conformance with applicable state and federal regulations and statutes; 2) in payment of an obligation incurred during the applicable program period; 3) not in excess of 100% of the funds delegated to that program under this agreement, including amendments; and 4) not in excess of 100% of the budget allocation for the particular line item category for that expenditure; and 5) not for duplicate payment for the same activities or services under both this agreement and any other contract or agreement with SCS or under more than one program covered by this agreement.

Expenditures shall be supported by properly executed payrolls, time records, invoices, contracts, vouchers, orders, cancelled checks, and/or any other accounting documents pertaining in whole or in part to the contract, in accordance with generally accepted accounting principles, Oregon Administrative Rules, and applicable federal requirements as specified herein. Expenditures shall be segregated by line item category within SUBGRANTEE's accounting system and so reported on the required fiscal reports.

- C. All income that is generated by or attributable to funds delegated under this agreement shall be identified and segregated for expenditures

relating to the approved work plan of the program for which the original funds were delegated. If cash is deposited in a combined or centralized income-yielding bank account, an allocation procedure shall be in place to make the necessary income to program segregations. This allocation method should be rational and equitable, but not so complex and time-consuming that the allocation process is not cost-effective. Expenditures of income from funds delegated under this agreement are to be made within the program period in which the income is earned, except energy rebates which may be expended in the immediate following program period.

- D. All unexpended funds or income from such funds remaining at the end of the program period set out in this agreement must be returned to SCS no later than 60 days following the expiration of the program period or the termination of this agreement, whichever is earlier. Expenses not reported within this specified time period shall not be paid by SCS.
 - E. Any costs disallowed either upon request for reimbursement or as a result of any audits, review or site visit shall not be paid by SCS, provided that the disallowed costs did not arise from the acts of SCS. SUBGRANTEE shall be given an opportunity to demonstrate that any proposed disallowance is in error. If a cost is disallowed after reimbursement has occurred, SUBGRANTEE shall make repayment of such costs within thirty (30) days of receipt of formal notice of disallowance of such expenditure(s).
 - F. In cases of suspected fraud by applicants, employee, subcontractors, or vendors, SUBGRANTEE shall cooperate with all appropriate investigative agencies, and shall assist in recovering invalid payments.
6. Property Management. All property valued at \$100 or more purchased in whole or in part with funds delegated under this agreement is the property of SCS. SUBGRANTEE and its subcontractors shall meet the following requirements for all such property:
- A. All certificates of title or other evidences of ownership shall show SCS as the owner of such property.
 - B. Property records shall be prepared and maintained accurately. Such records shall include a description of each item of property; manufacturer's serial number, acquisition date and cost; source of the property; whether the item of property was new or used at the time of acquisition; percentage of State funds used in the purchase of property; and location, use and condition of the property.
 - C. A physical inventory of property shall be taken at least once every year to verify the existence, current utilization, and continued need for the property. The results of the physical inventory shall be reconciled with the property records.
 - D. A control system shall be in effect to ensure adequate safeguards to prevent loss, damage, or theft of the property. Any loss, damage, or theft of the property shall be investigated and fully documented.

- E. Adequate maintenance procedures shall be implemented to keep the property in good condition.
- F. Within 60 days following the expiration of any program period or upon termination of this agreement, whichever is earlier, SUBGRANTEE and its subcontractors shall transfer back to SCS all nonexpendable property purchased for that program, if so directed by SCS.

7. Audits.

- A. SUBGRANTEE and its subcontractors shall permit authorized representatives of SCS, State of Oregon Division of Audits and/or the applicable audit agency of the United States Government to make such review of the records of SUBGRANTEE and subcontractors that these entities may deem necessary to satisfy audit and/or program evaluation purposes. SUBGRANTEE shall permit, and shall require subcontractors to permit, authorized representatives of SCS to site visit all programs and activities funded in whole or in part by this agreement.
- B. SUBGRANTEE shall provide to SCS an annual audit of all receipts and expenditures, from whatever source, whether cash or non-cash. The annual audit may be prepared either at the end of the SUBGRANTEE's fiscal year, or upon termination of this agreement, so long as the audit covers a period no longer than 12 months.

Audits must be submitted to SCS within 180 days after the end of the SUBGRANTEE fiscal year or termination of this agreement. Failure to submit required audits by specified deadlines will be cause for withholding of payments until audits are submitted.

- C. All audits required pursuant to this section must be prepared by an independent and qualified external auditor. SUBGRANTEE is required to change independent auditors at least every three years.

All audit workpapers pertaining to the annual audit shall be retained for three years following the date the audit is submitted to SCS and shall be open for examination by any and all federal, state and county auditors and/or representatives.

- D. All fiscal records and audits required hereunder must be prepared consistent, as applicable to SUBGRANTEE and subcontractors, with the following:

- (1) Standards contained in the U.S. General Accounting Office (GAO) publication entitled "Standard for Audit for Governmental Organizations, Programs, Activities and Functions" and the GAO publication entitled "Guideline for Financial and Compliance Audits of Federally Assisted Programs."
- (2) The Single Audit Act of 1984 (P.L. 98-502) as applicable.
- (3) Generally accepted accounting principles as defined by the American Institute of Certified Public Accountants, Inc., as such may change

from time to time.

(4) Office of Management and Budget (OMB):

- i. Circulars A-87 and A-102 (Common Rule) and A-128 if SUBGRANTEE is a governmental entity:
- ii. Circulars A-110 and A-122 if SUBGRANTEE is a non-governmental entity.

- E. The auditor must state in the audit report that the audit meets the cited standards and must include a management letter.
- F. SUBGRANTEE shall establish and maintain, and shall be responsible for ensuring that subcontractors establish and maintain, systematic methods to assure timely and appropriate resolution of review/audit findings and recommendations.

8. Monitoring and Sanctions.

- A. Monitoring of SUBGRANTEE will be done at regular intervals. SCS staff will give reasonable notification of monitoring schedules. The SUBGRANTEE must provide all records requested by SCS for this monitoring.

Monitoring shall include, but not be limited to: 1) inspection of client files, program records and reports, inventory records, and fiscal records including original receipts for expenditures, 2) review of compliance with agreement provisions, work plan(s), budget reports, and state and federal regulations, and 3) physical inventory of fixed assets, weatherization materials and USDA commodity foods.

- B. SUBGRANTEE will be advised within thirty (30) days after the monitoring visit of findings. If the monitoring identifies deficiencies, preliminary findings will be issued with examples and corrective action will be requested. SUBGRANTEE will have thirty days (30) from receipt of the preliminary findings to request assistance, to file a corrective plan or to explain why the findings are in error.

SCS shall notify SUBGRANTEE of its acceptance or rejection of all or part of SUBGRANTEE's response within ten (10) days. SUBGRANTEE will have an additional twenty (20) days to provide an acceptable corrective action plan for any remaining, unresolved deficiencies.

If unresolved deficiencies remain, SCS shall transmit to SUBGRANTEE a finding of facts detailing the specific deficiencies and required corrective actions. SUBGRANTEE shall have thirty (30) days to take corrective actions.

- C. If corrective actions have not taken place by the end of the thirty (30) days, SCS will notify SUBGRANTEE of the sanctions it will apply. Such sanctions may include, without limitation: withholding of funds, disallowance of costs, suspension of payments or termination of this agreement. SCS will inform SUBGRANTEE of the appeals process in its

sanction notice.

The rights and remedies of SCS provided in the above clause shall not be exclusive and are in addition to any other rights and remedies provided by law or under this agreement.

9. Amendments to Agreement. All amendments or modifications to this agreement shall be in writing. Either party to this agreement may initiate modifications to this agreement, the approved work plans, and budgets at any time. All modifications which have been mutually agreed upon shall be executed on forms provided by SCS, signed by both parties, and shall become amendments to this agreement.

10. Termination.

- A. SCS may, upon 30 days written notice delivered to SUBGRANTEE by certified mail or in person, terminate this agreement in whole or in part, under any of the following conditions:
- (1) If SUBGRANTEE fails to fulfill obligations under this agreement including but not limited to: filing of accurate, complete and timely reports and audits, filing of inventory records, compliance with applicable state and federal regulations, compliance with the approved work plans and approved budgets, compliance with directives received from the federal agency which is the source of the grant funds;
 - (2) If funds provided under this agreement are used improperly or illegally;
 - (3) If SCS funding from the responsible federal agency is not obtained, is suspended, reduced or eliminated;
 - (4) If the SCS appropriation or authorization to expend funds from the Oregon State Legislature is not obtained, is suspended, reduced or eliminated, or if any of the state funded programs are reduced or eliminated;
 - (5) If a new Community Action Agency (CAP) is certified in SUBGRANTEE's area;
 - (6) If any license or certificate required by law or required to be held by SUBGRANTEE to provide the services required by this agreement is for any reason denied, revoked or not renewed;
 - (7) If SUBGRANTEE (a) applies for or consents to the appointment of, or the taking of possession by, a receiver, custodian, trustee, or liquidator of itself or its property, (b) admits in writing its inability, or is generally unable, to pay its debts as they become due, (c) makes a general assignment for the benefit of its creditors, (d) commences a voluntary case under the Federal Bankruptcy Code (as now or hereafter in effect), (e) is adjudicated as bankrupt or insolvent, (f) fails to controvert in a timely or

appropriate manner, or agrees in writing to, an involuntary petition for bankruptcy;

(8) If SUBGRANTEE is suspended, debarred, proposed for debarment, declared ineligible or voluntarily excluded from participating in agreement or contract with any federal department or agency.

- B. In the event of termination of this agreement, all unexpended money, property and finished or unfinished documents, data, studies, and reports purchased or prepared by SUBGRANTEE under this agreement shall be returned to SCS within 60 days of written notice.
- C. Upon issuance of the notice to terminate this agreement, SCS may require that all expenditures be suspended upon delivery of said notice and any additional expenditures must have prior approval by SCS. SUBGRANTEE shall be entitled to compensation for any unreimbursed expenses reasonably or necessarily incurred in satisfactory performance of this agreement and within its approved work plans and approved budgets prior to receipt of a termination notice pursuant to this section, or, if SCS does not require suspension of expenditures upon receipt of the termination notice, prior to the effective date of the termination.

Notwithstanding the above, SUBGRANTEE shall not be relieved of its liability to SCS for damages sustained by SCS by virtue of any breach of this agreement by SUBGRANTEE. SCS may withhold any reimbursement to SUBGRANTEE for the purpose of compensation for damages until such time as the exact damages due to SCS from SUBGRANTEE are agreed upon or otherwise determined.

11. Purchases and Procurement.

- A. In procuring, by purchase, rental or otherwise, any equipment, supplies or services, SUBGRANTEE and its subcontractors shall obtain prior written approval from SCS before entering into any sole source contract or contract where only one bid or proposal is received when the value of the contract is expected to exceed:
 - (1) \$5,000 in the aggregate, if SUBGRANTEE is a non-governmental entity;
 - (2) \$10,000 in the aggregate, if SUBGRANTEE is a governmental entity.
- B. SUBGRANTEE and its subcontractors shall obtain prior written approval from SCS before purchasing equipment or other property costing more than \$300 per item. SCS may require SUBGRANTEE to solicit and retain a minimum of three (3) written bids when making purchases of such equipment or property.

12. Subcontracts.

- A. SUBGRANTEE shall not enter into any subcontract without prior written approval of SCS.
- B. SUBGRANTEE shall have a written contract with each subcontract entity. All subcontracts must be executed prior to the first day of service,

unless prior written approval has been granted by SCS. SUBGRANTEE agrees to furnish a copy of each subcontract to SCS upon request.

- C. At a minimum all subcontract agreements must specify:
- (1) That subcontractor shall comply with all applicable provisions of this agreement between SCS and SUBGRANTEE, each of which must be specifically incorporated into the subcontract;
 - (2) That subcontractor shall comply with all applicable federal, state, county and local statutes, rules, regulations, policies, guidelines, requirements and funding criteria governing services, facilities and operations; and
 - (3) That subcontractor is an independent contractor and not an agent of SCS or SUBGRANTEE. The subcontractor shall indemnify, defend and hold harmless the State of Oregon, and SUBGRANTEE and their officers, agents and employees, from all suits, actions or claims of any character brought because of any injuries or damage received or sustained by any person, persons or property on account of the operations of the subcontractor, their own subcontractors or the employees of either; or on account of or in consequence of carrying out the terms of the subcontract; or because of any act or omission, neglect or misconduct of the subcontractor.
- D. SUBGRANTEE shall take all reasonable steps to ensure that subcontractors have adequately trained their employees and to verify that subcontractors are processing any necessary eligibility determinations and authorizations accurately.
- E. SUBGRANTEE shall be responsible for monitoring and auditing the activities of its subcontractors at least annually and as frequently as necessary to ensure that all regulations are being complied with and that funds are being spent for authorized purposes. Monitoring shall include, without limitation, all the activities listed in the second paragraph of Section 8(A).
- F. Responsibility for program integrity shall remain with SUBGRANTEE. Any disallowed costs on the part of the subcontractors, due to error or otherwise, will be considered to be disallowed costs of SUBGRANTEE. If SUBGRANTEE is a county, such disallowed costs may be recovered by SCS only through repayment under Section 5E or withholding under Section 2D of this agreement, to the extent permitted by the Oregon Constitution, Article XI, Section 10. If SUBGRANTEE is other than a county, SCS may recover such disallowed costs through repayment, withholding, or other means permitted by law.
- G. SUBGRANTEE shall take all reasonable steps in selecting, monitoring and auditing its subcontractors to prevent misuse or mismanagement of funds delegated under this agreement. SUBGRANTEE shall take all reasonable action against its subcontractors, at SUBGRANTEE's expense, to recover any funds misused, mismanaged or misspent. Any funds recovered shall be repaid to SCS under Section 5E.

13. Compliance with laws. SUBGRANTEE and its subcontractors shall comply with all federal laws, regulations and instructions, state statutes and regulations, local ordinances and codes and the Oregon state plan, if any, applicable to this agreement or the work to be performed or funds delegated by this agreement including, but not limited to those specified in Exhibits E attached hereto and by this reference made a part hereof.

In addition, SUBGRANTEE and its subcontractors shall comply with the assurances listed in Exhibit F, attached hereto and by this reference made a part hereof.

14. Confidentiality. SUBGRANTEE and its subcontractors shall protect the confidentiality of all information concerning applicants for and recipients of services funded by this agreement and shall not release or disclose any such information except as directly connected with the administration of the particular SCS program(s) or as authorized in writing by the applicant or recipient. All records and files shall be appropriately secured to prevent access by unauthorized persons.

SUBGRANTEE and its subcontractors shall ensure that all officers, employees, and agents are aware of and comply with this confidentiality requirement

15. Equal Opportunity. SUBGRANTEE shall ensure that no person or group of persons shall, on the ground of age, race, color, national origin, primary language, sex, religion, handicap, political affiliation or belief, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity funded in whole or in part by funds delegated under this agreement.

16. SUBGRANTEE Status.

- A. SUBGRANTEE certifies that the work performed under this agreement is that of an independent contractor and that SUBGRANTEE is not an officer, employee or agent of the state as those terms are used in ORS 30.265 with respect to work performed under this agreement. SUBGRANTEE agrees that insurance coverage, whether purchased or by self-insurance, for SUBGRANTEE's agent, employees and subcontractors is the sole responsibility of SUBGRANTEE.
- B. SUBGRANTEE certifies that it is not employed by or contracting with the federal government for the work covered by this agreement.
- C. SUBGRANTEE certifies that it is not ineligible to enter into a contract involving federal funds by virtue of any of the reasons specified in Exhibit G attached hereto and by this reference incorporated herein.

17. Dual Payment. SUBGRANTEE shall not be compensated for work performed under this agreement from any other department of the State of Oregon, nor from any other source, including the federal government, unless such funds are used solely to increase the total services to be provided under this agreement. Any funds received through or for activities arising under this agreement shall immediately be reported to SCS.

18. Indemnity. SUBGRANTEE shall indemnify, defend and hold harmless the State of Oregon, SCS, its officers, agents, employees and members, from all claims, suits or action of whatsoever nature resulting from or arising out of the activities or omissions of SUBGRANTEE or its subcontractors, agents or employees under this agreement. This indemnity provision shall not require SUBGRANTEE to defend or indemnify the state against any action based solely on the alleged negligence of the state. This indemnity provision shall be interpreted in accordance with any limitations imposed by Article XI, Sections 7 and 10 of the Oregon Constitution and by the Oregon Tort Claims Act.
19. Captions. The captions or headings in this agreement are for convenience only and in no way define, limit or describe the scope or intent of any provisions of this agreement.
20. Severability. If any terms or provision of this agreement shall be held invalid or unenforceable by any court of competent jurisdiction, such holding shall not invalidate or render unenforceable any other provision thereof.
21. Waiver. The failure of SCS to enforce any provision of this agreement shall not constitute a waiver by SCS of that or any other provision.
22. MERGER. THIS AGREEMENT CONSTITUTES THE ENTIRE AGREEMENT BETWEEN THE PARTIES. NO WAIVER, CONSENT, MODIFICATION OR CHANGE IN THE TERMS OF THIS AGREEMENT SHALL BIND EITHER PARTY UNLESS IN WRITING AND SIGNED BY BOTH PARTIES. SUCH WAIVER, CONSENT, MODIFICATION OR CHANGE, IF MADE, SHALL BE EFFECTIVE ONLY IN THE SPECIFIC INSTANCE AND FOR THE SPECIFIC PURPOSE GIVEN. THERE ARE NO UNDERSTANDINGS, AGREEMENTS, OR REPRESENTATIONS, ORAL OR WRITTEN, NOT SPECIFIED HEREIN REGARDING THIS AGREEMENT.

SUBGRANTEE, BY THE SIGNATURE BELOW OF ITS AUTHORIZED REPRESENTATIVE, HEREBY ACKNOWLEDGES THAT IT HAS READ THIS AGREEMENT, UNDERSTANDS IT, AND AGREES TO BE BOUND BY ITS TERMS AND CONDITIONS.

APPROVED:

SUBGRANTEE:

MULTNOMAH COUNTY DEPARTMENT
OF HUMAN SERVICES
426 SW Stark, 7th Floor
Portland, Oregon 97204
503-248-3782

By William D. [Signature]
Community Action Program

7/27/89
Date

By _____
Director, Aging Services Divis'n Date

By _____
Gladys McCoy, Chair Date
Multnomah County Board of Commissioners

GRANTEE:

OREGON STATE COMMUNITY SERVICES
Department of Human Resources
207 Public Service Building
Salem, Oregon 97310

By _____
Victor Vasquez, Jr., Manager

Date: _____

SCS Contract #: 90-50847

REVIEWED:

LAURENCE KRESSEL
County Counsel
Multnomah County, Oregon

By _____
Assistant County Counsel

NOTE: One set of Exhibits D (Reports), F (Assurances), and G (Debarment Certificate) must be attached hereto. In addition, the following exhibits must be completed for each program as indicated below with information specific to that program and attached hereto.

[5449A/10]

Contract With SCS: \$1,740,492

EXHIBIT E

Certification Regarding Debarment, Suspension,
and Other Responsibility Matters

1. PORTLAND STATE UNIVERSITY REGIONAL RESEARCH INSTITUTE (SUBGRANTEE) certifies to the best of its knowledge and belief, that neither it nor any of its principals:
- (a) Are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) Have within a three-year period preceding this agreement been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) Are presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph 1(b) of this certification; and
 - (d) Have within a three-year period preceding this agreement had one or more public transactions (Federal, State or local) terminated for cause or default.
2. Where the prospective SUBGRANTEE is unable to certify to any of the statements in this certification, such prospective SUBGRANTEE shall attach an explanation to this proposal.

(Director)

Date: _____

(Chairperson)

Date: _____

EXHIBIT E -- PART II
OMB No. 1901-0247

U.S. Department of Energy

Assurance of Compliance

Nondiscrimination in Federally Assisted Programs

PORTLAND STATE UNIVERSITY REGIONAL RESEARCH INSTITUTE

(Hereinafter called the "Subgrantee") HEREBY AGREES to comply with Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), Section 16 of the Federal Energy Administration Act of 1974 (Pub. L. 93-275), Section 401 of the Energy Reorganization Act of 1974 (Pub. L. 93-438), Title IX of the Education Amendments of 1972, as amended, (Pub. L. 92-318, Pub. L. 93-568, and Pub. L. 94-482), Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), the Age Discrimination Act of 1975 (Pub. L. 94-135), Title VIII of the Civil Rights Act of 1968 (Pub. L. 90-284), the Department of Energy Organization Act of 1977 (Pub. L. 95-91), and the Energy Conservation and Production Act of 1976, as amended, (Pub. L. 94-385). In accordance with the above laws and regulations issued pursuant thereto, the Subgrantee agrees to assure that no person in the United States shall, on the ground of race, color, national origin, sex, age, or handicap, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity in which the Applicant receives Federal assistance from the Department of Energy.

Applicability and
Period of Obligation

In the case of any service, financial aid, covered employment, equipment, property, or structure provided, leased, or improved with Federal assistance extended to the Subgrantee by the Department of Energy, this assurance obligates the Subgrantee for the period during which Federal assistance is extended. In the case of any transfer of such service, financial aid, equipment, property, or structure, this assurance obligates the Subgrantee for the period during which it retains ownership or possession of the property. In all other cases, this assurance obligates the Subgrantee for the period during which the Federal assistance is extended to the Applicant by the Department of Energy.

Employment Practices

Where a primary objective of the Federal assistance is to provide employment or where the Subgrantee's employment practices affect the delivery of services in programs or activities resulting from Federal assistance extended by the Department, the Subgrantee agrees not to discriminate on the ground of race, color,

national origin, sex, age, or handicap, in its employment practices. Such employment practices may include, but are not limited to, recruitment, recruitment advertising, hiring, layoff or termination, promotion, demotion, transfer, rates of pay, training and participation in upward mobility programs, or other forms of compensation and use of facilities.

Subcontractors' Assurance

The Subgrantee shall require any individual, organization, or other entity with whom it subcontracts, subgrants, or subleases for the purpose of providing any service, financial aid, equipment, property, or structure to comply with laws cited above. To this end, the subcontractor shall be required to sign a written assurance form.

Data Collection and Access to Records

The Subgrantee agrees to compile and maintain information pertaining to programs or activities developed as a result of the Subgrantee's receipt of Federal assistance from the Department of Energy. Such information shall include, but is not limited to, the following: (1) the manner in which services are or will be provided and related data necessary for determining whether any persons are or will be denied such services on the basis of prohibited discrimination; (2) the population eligible to be served by race, color, national origin, sex, age and handicap; (3) data regarding covered employment including use or planned use of bilingual public contact employees serving beneficiaries of the program where necessary to permit effective participation by beneficiaries unable to speak or understand English; (4) the location of existing or proposed facilities connected with the program and related information adequate for determining whether the location has or will have the effect of unnecessarily denying access to any person on the basis of prohibited discrimination; (5) the present or proposed membership by race, color, national origin, sex, age and handicap, in any planning or advisory body which is an integral part of the program; and (6) any additional written data determined by the Department of Energy to be relevant to its obligation to assure compliance by recipients with laws cited in the first paragraph of this assurance.

The Subgrantee agrees to submit requested data to the Department of Energy regarding programs and activities developed by the Subgrantee from the use of Federal assistance funds extended by the Department of Energy. Facilities of the Subgrantee (including the physical plants, buildings, or other structures) and all records, books, accounts, and other sources of information pertinent to the Subgrantee's compliance with the civil rights laws shall be made available for inspection during normal business hours on request of an officer or employee of the Department of Energy specifically authorized to make such inspections. Instructions in this regard will be provided by the Director, Office of Equal Opportunity, U.S. Department of Energy.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts (excluding procurement contracts),

property, discounts or other Federal assistance extended after the date hereto, to the Subgrantee by the Department of Energy, including installment payments on account after such date of application for Federal assistance which are approved before such date. The Subgrantee recognizes and agrees that such Federal assistance will be extended in reliance upon the representations and agreements made in this assurance and that the United States shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Subgrantee, its successors, transferees, and assignees, as well as the person whose signature appears below and who is authorized to sign this assurance on behalf of the Subgrantee.

(Subgrantee)--Agency Director)

(Subgrantee--Board Chair)

Date: _____

Date: _____

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
 CERTIFICATION REGARDING
 DRUG-FREE WORKPLACE REQUIREMENTS
 FOR GRANTEES OTHER THAN INDIVIDUALS

By drawing funds against this grant award, the grantee is providing the certification set out below:

This certification is required by regulations implementing the Drug-Free Workplace Act of 1988, 45 CFR Part 76, Subpart F. The regulations, published in the January 31, 1989 Federal Register, require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when HHS determines to award the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or governmentwide suspension or debarment.

The grantee certifies that it will provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing a drug-free awareness program to inform employees about:
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and,
 - (4) The penalties that may be imposed upon employees for drug abuse violation occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:
 - (1) Abide by the terms of the statement; and,
 - (2) Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction;
- (e) Notifying the agency within ten days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction;
- (f) Taking one of the following actions, within 30 days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:
 - (1) Taking appropriate personnel action against such an employee, up to and including termination; or
 - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

Subgrantee-Director

Date

Subgrantee-Chair

Date



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

ORIGINAL

MULTNOMAH COUNTY OREGON

Contract # 102880

Amendment # 10

CLASS I <input type="checkbox"/> Professional Services under \$10,000	CLASS II <input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	CLASS III <input checked="" type="checkbox"/> Intergovernmental Agreement <i>R-10</i> <i>12/21/89</i>
---	---	---

Contact Person Bill Thomas/John Pearson Phone 248-5464 Date 11/30/89

Department Human Services Division Aging Services Bldg/Room 161/2nd Floor

Description of Contract Intergovernmental agreement with Regional Research Institute (RRI) at Portland State University for \$41,873 to evaluate two (2) demonstration projects; one funded by State Community Services and one funded by the U.S. Department of Health and Human Services.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name Portland State University

Mailing Address PO Box 751
Portland, OR

Phone 725-4094

Employer ID # or SS # 936001786

Effective Date July 1, 1989

Termination Date June 30, 1990

Original Contract Amount \$ 41,873

Amount of Amendment \$ _____

Total Amount of Agreement \$ 41,873

Payment Term

☐ Lump Sum \$ _____

☐ Monthly \$ _____

☒ Other \$ _____

☐ Requirements contract - Requisition required.

Purchase Order No. _____

☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager Duane Zussy

Purchasing Director
(Class II Contracts Only)

County Counsel [Signature]

County Chair/Sheriff [Signature]

Date 12/7/89

Date _____

Date 12.7.89

Date 12/31/89

VENDOR CODE				VENDOR NAME					TOTAL AMOUNT \$		
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	156	010	0144047		CA04	6060		1754		8,000	
02.	156	010	0144047		CA04	6060		1766		33,873	
03.											

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/COD** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT** - Requisition Required - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
23. **LGFS DESCRIPTION** - Abbreviated description for Data Entry purposes.
24. **AMOUNT** - If total dollar amount is being split among different account numbers, indicate dollar amounts here.

DATE SUBMITTED _____

(For Clerk's Use)
Meeting Date 12/21/89
Agenda No. R-17

REQUEST FOR PLACEMENT ON THE AGENDA
Approval of Three (3) Amendments
Subject: to State Community Services Contract

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Human Services

DIVISION Aging Services

CONTACT Bill Thomas/John Pearson

TELEPHONE 248-5464

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Duane Zussy/Jim McConnell

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Three (3) amendments add a total of \$188,894 to the County's omnibus contract with State Community Services. One amendment waives a provision that the County change auditors every three years; a second adds \$183,003 in Petroleum Violation Escrow funds for low income weatherization services; the third amendment adds Oregon Partners In Energy carryover funds and extends the contract period for these funds from October 31, 1989 to June 30, 1990.

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ APPROVAL

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA 5 minutes

IMPACT:

PERSONNEL

☒ FISCAL/BUDGETARY
☐ - General Fund

Other _____

*Originals sent to
Bill Thomas 12/26/89*

1989 DEC 22 AM 10:16
CLERK OF BOARD
COUNTY OF CLATSOP
OREGON

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: Duane Zussy (pc)

BUDGET / PERSONNEL /

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) [Signature]

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
AGING SERVICES DIVISION
COMMUNITY ACTION PROGRAM OFFICE
426 S.W. STARK, 5TH FLOOR
PORTLAND, OREGON 97204
(503) 248-5464

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Gladys McCoy
Multnomah County Chair

VIA: Duane Zussy, Director *Duane Zussy (OK)*
Department of Human Services

FROM: Jim McConnell, Director *JM*
Aging Services Division

DATE: December 1, 1989

SUBJECT: Approval of Three Amendments to County's Omnibus Contract with
State Community Services

RECOMMENDATION: The Aging Services Division recommends that the Board of County Commissioners ratify the attached three amendments which add a total of \$188,894 to the County's omnibus contract with State Community Services.

ANALYSIS: One amendment has no fiscal impact and two amendments add additional funds. The amendment with no fiscal impact waives, at the County's request, a provision that the County change auditors at least every three years. A second amendment adds \$183,003 in Petroleum Violation Escrow funds for weatherization services. It also increases U.S. Department of Energy (DOE) funds available for administration by \$9,626 while reducing U.S. DOE program funds by the same amount. The third amendment increases Oregon Partners in Energy (OPIE) funds by \$5,891 to reflect carryover of funds from FY 88-89, while, at the County's request, extending the contract period for those funds from October 31, 1989, to June 30, 1990. This amendment is being processed concurrently with a subcontract to Portland State University for OPIE evaluation funds.

BACKGROUND: The County's July 1 1989, to June 30, 1990, omnibus contract with SCS was ratified by the BCC on August 31, 1989. Funds contained in these amendments were anticipated in the FY 89-90 approved budget for the Community Action Program Office.

ADDENDUM TO AGREEMENT
CONTRACT #90-50847
between

OREGON STATE COMMUNITY SERVICES

Department of Human Resources
(hereinafter referred to as the Grantee)

and

MULTNOMAH COUNTY DEPARTMENT OF HUMAN SERVICES
(herein referred to as the Subgrantee)

WHEREAS, an original contract between the parties exists for the operation of Multnomah County Department of Human Services' programs for the period beginning JULY 1, 1989 and ending JUNE 30, 1990 and,

WHEREAS, the part of Section 7C that required a change of auditors at least every three years in hereby waived and,

THEREFORE, all provisions of the original agreement are still in effect. This addendum, to be valid, must be signed by all parties to the original contract.

APPROVED:

SUBGRANTEE

MULTNOMAH COUNTY DEPARTMENT
OF HUMAN SERVICES
421 SW 5th, 2nd Floor
Portland, Oregon 97204

By William B. Young
Manager
Community Action Program Office

11/21/89
Date

By Jim McConnell
Director
Aging Services Division Board
of Commissioners

12-1-89
Date

By Gladys McCoy
Gladys McCoy, Chair
Multnomah County Board of Commissioners

12/3/89
Date

GRANTEE

OREGON STATE COMMUNITY SERVICES
Department of Human Resources
207 Public Service Building
Salem, Oregon 97310

By _____
Victor Vasquez, Jr., Director
Date _____

REVIEWED:

LAURENCE KRESSEL
County Counsel
Multnomah County, Oregon

By LA K 12.7.89
Assistant County Counsel

**CONTRACT APPROVAL FORM**

(See Administrative Procedure #2106)

Contract # 102270Contract # DHS #227 89-90Amendment # 2

MULTNOMAH COUNTY OREGON

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption)	<input checked="" type="checkbox"/> Intergovernmental Agreement
	<input type="checkbox"/> PCRB Contract	
	<input type="checkbox"/> Maintenance Agreement	
	<input type="checkbox"/> Licensing Agreement	
	<input type="checkbox"/> Construction	
	<input type="checkbox"/> Grant	
	<input type="checkbox"/> Revenue	

Contact Person Bill Thomas / John Pearson Phone 248-5464 Date 12/1/89Department Human Services Division Aging Services Bldg/Room 161/2 Fl.Description of Contract Amendment waiving part of Section 7C of an omnibus contract requiring a change of auditors every three (3) years. Omnibus contract was ratified by the Board on 8/31/89.RFP/BID # - Date of RFP/BID - Exemption Exp. Date -ORS/AR # - Contractor is ☐ MBE ☐ WBE ☐ QRFContractor Name State Community ServicesMailing Address 207 Public Service Bldg.
Salem, Oregon 97310Phone 1-378-4729Employer ID # or SS # -Effective Date July 1, 1989Termination Date June 30, 1990Original Contract Amount \$ 1,740,492Amount of Amendment \$ -0-Total Amount of Agreement \$ 1,740,492**Payment Term**☐ Lump Sum \$ -☒ Monthly \$ Reimbursement☐ Other \$ -☐ Requirements contract - Requisition required.Purchase Order No. -☐ Requirements Not to Exceed \$ -**REQUIRED SIGNATURES:**Department Manager Duane Masy (w)Purchasing Director
(Class II Contracts Only) [Signature]County Counsel [Signature]County Chair/Sheriff [Signature]Date 12/7/89Date 12.7.89Date 12.7.89Date 12/24/89

VENDOR CODE				VENDOR NAME					TOTAL AMOUNT		\$	
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND	
01.	156	010	0130							-0-		
02.												
03.												

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

ADDENDUM TO AGREEMENT
BETWEEN
OREGON STATE COMMUNITY SERVICES
Department of Human Resources
hereinafter referred to as SCS)
and

MULTNOMAH COUNTY DEPARTMENT OF HUMAN SERVICES
(hereinafter referred to as SUBGRANTEE)

WHEREAS, an original contract between parties exists and,

WHEREAS, this changes the funding on the following programs for the following periods.

	SCS Program	FFY	ADMIN	PROGRAM	Contract From	Period TO
Existing Contract Amt.	PVE	90	-0-	-0-	9-5-89	3-31-90
Change in Contract Amt.	PVE	90	-0-	183,003	9-5-89	3-31-90
New Contract Amount	PVE	90	-0-	183,003	9-5-89	3-31-90 <i>WVH</i>
Existing Contract Amt.	DOE	90A	16,112	306,122	7-1-89	3-31-90
Change in Contract Amt.	DOE	90A	9,626	(9,626)	7-1-89	3-31-90
New Contract Amount	DOE	90A	25,738	296,496	7-1-89	3-31-90

THEREFORE, all provisions of the original agreement are still in effect. This addendum, to be valid, must be signed by all parties to the original contract.

APPROVED:

SUBGRANTEE

MULTNOMAH COUNTY DEPARTMENT
OF HUMAN SERVICES
421 SW 5th, 2 nd Floor
Portland, Oregon 97204

By *William B. Thuring* 11/21/89
Manager
Community Action Program Office

By *Jm McLaughlin* 12-1-89
Director
Multnomah County Board
Aging Services Division Dir.

By *Gladys McCoy* 12/21/89
Gladys McCoy, Chair
Multnomah County Board of Commissioners

GRANTEE

OREGON STATE COMMUNITY SERVICES
Department of Human Resources
207 Public Service Building
Salem, Oregon 97310

By _____
Victor Vasquez, Jr., Director

Date _____

REVIEWED:

LAURENCE KRESSEL
County Counsel
Multnomah County, Oregon

By *LK* 12.7.89
Assistant County Counsel

Contract # DVE 90-50847

Contract # DOE 90-50847



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

DHS #227

MULTNOMAH COUNTY OREGON

Contract # 102270

Amendment # 3

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption)	<input checked="" type="checkbox"/> Intergovernmental Agreement
	<input type="checkbox"/> PCRB Contract	
	<input type="checkbox"/> Maintenance Agreement	
	<input type="checkbox"/> Licensing Agreement	
	<input type="checkbox"/> Construction	
	<input type="checkbox"/> Grant	
	<input type="checkbox"/> Revenue	

Contact Person Bill Thomas/John Pearson Phone 248-5464 Date 12/1/89

Department Human Services Division Aging Services Bldg/Room 161/2nd

Description of Contract Adds \$183,003 in Petroleum Violations Escrow funds for weatherization services. Increases U.S. Dept of Energy (DOE) administration funds by \$9,626 while reducing U.S. Doe Program funds of the same amount.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name State Community Services

Mailing Address 207 Public Services Building
Salem, OR 97310

Phone 1-378-4729

Employer ID # or SS # _____

Effective Date July 1, 1989

Termination Date June 30, 1990

Original Contract Amount \$1,740,492

Amount of Amendment \$183,003

Total Amount of Agreement \$1,923,495

Payment Term

☐ Lump Sum \$ _____

☒ Monthly \$ Reimbursement

☐ Other \$ _____

☐ Requirements contract - Requisition required.

Purchase Order No. _____

☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager Diane Tussy

Purchasing Director _____

(Class II Contracts Only)

County Counsel [Signature]

County Chair/Sheriff [Signature]

Date 12/7/89

Date _____

Date 12.7.89

Date 12/31/89

VENDOR CODE			VENDOR NAME						TOTAL AMOUNT \$		
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	REVENUE	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	156	010	0130			2077			PVE FFY89 2077	183,003	
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

DHS #227

Contract # 102270

MULTNOMAH COUNTY OREGON

Amendment # 4

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption)	<input checked="" type="checkbox"/> Intergovernmental Agreement
	<input type="checkbox"/> PCRB Contract	
	<input type="checkbox"/> Maintenance Agreement	
	<input type="checkbox"/> Licensing Agreement	
	<input type="checkbox"/> Construction	
	<input type="checkbox"/> Grant	
	<input type="checkbox"/> Revenue	

Contact Person Bill Thomas/John Pearson Phone 248-5464 Date 12/1/89

Department Human Services Division Aging Services Bldg/Room 161/2nd Floor

Description of Contract Amendment to Revenue contract with State Community Services providing for \$5,891 in OPIE Chronic Arrearages Project funds and extends the contract period from October 31, 1989 to June 30, 1990. Amendment reflects actual funds carried over from FY88-89 to FY89-90.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name State Community Services

Mailing Address 207 Public Services Building
Salem, OR 97310

Phone 1-378-4729

Employer ID # or SS # _____

Effective Date July 1, 1989

Termination Date June 30, 1990

Original Contract Amount \$ 1,923,495

Amount of Amendment \$ 5,891

Total Amount of Agreement \$ 1,929,386

Payment Term

☐ Lump Sum \$ _____

☒ Monthly \$ Reimbursement

☐ Other \$ _____

☐ Requirements contract - Requisition required.

Purchase Order No. _____

☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager Duane Tussy (pc)

Date 12/7/89

Purchasing Director
(Class II Contracts Only)

Date _____

County Counsel

Date 12.7.89

County Chair/Sheriff

Date 12/21/89

VENDOR CODE				VENDOR NAME				TOTAL AMOUNT		\$	
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	REVENUE	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	156	010	0130			2092			OPIE FFY89 2092	5,891	
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

AMENDMENT OF AGREEMENT

The Agreement between the State of Oregon, Department of Human Resources, State Community Services and,

Multnomah County
Department of Human Services
421 SW 5th, 2nd Floor
Portland, Oregon 97204

hereinafter referred to as "subgrantee"

is amended as follows: The OPIE-LUSSA Contract for FFY 90 is amended to increase the Program dollars from \$61,029 by \$5,891 to \$66,920 for the contract period July 1, 1989 through June 30, 1990. All other terms and conditions of the contract are unchanged.

This amendment shall be effective from the effective date of the contract or the condition stated in this agreement.

AGREED:

APPROVED

MULTNOMAH COUNTY DEPARTMENT
OF HUMAN SERVICES
421 SW 5th, 2nd Floor
Portland, Oregon 97204

OREGON STATE COMMUNITY SERVICES
Department of Human Resources
207 Public Service Building
Salem, Oregon 97310

By William B. Drans 11/21/89
Manager Date
Community Action Program Office

By _____
Victor Vasquez, Jr., Director
Date _____

By Jim McConnell DMIL 12-1-89
Director Date
Aging Services Division, Board
of Commissioners

By Gladys McCoy 12/2/89
Gladys McCoy, Chair Date
Multnomah County Board of Commissioners

REVIEWED:

LAURENCE KRESSEL
County Counsel
Multnomah County, Oregon

By John Kessel 12-7-89
Assistant County Counsel

REVIEWED:

Dexter Henderson
Contract Manager

Date October 26, 1989

DATE SUBMITTED _____

(For Clerk's Use)

Meeting Date 12-21-89

Agenda No. R-18a

REQUEST FOR PLACEMENT ON THE AGENDA

INTERGOVERNMENTAL

Subject: AGREEMENT

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Human Services DIVISION Health

CONTACT Art Bloom TELEPHONE 2404

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Duane Zussy/Scott Clement

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Request Ratification of Intergovernmental Revenue Agreement whereby Gresham Elementary School agrees to reimburse County for performing semi-annual inspections of food service operations for period upon execution to August 31, 1991.

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ RATIFICATION

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA _____

IMPACT:

PERSONNEL

☐ FISCAL/BUDGETARY

☒ GENERAL FUND \$470

OTHER _____

3 Originals Sent to Art Bloom 12/26/89

1989 DEC 13 AM 9:10
HOLLAND COUNTY
OREGON

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: Duane Zussy

BUDGET / PERSONNEL: _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) [Signature]

OTHER _____

(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

FY 89-90

Contract # 102900

Amendment # _____

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input checked="" type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement <u>R-182</u> <u>12/2/89</u>

Contact Person Kennedy Phone 3674 Date 12-3-89

Department Human Services Division Health Bldg/Room 160/8

Description of Contract This is an agreement allowing the Environmental Health section to inspect school food service facilities in accordance with OAR 581-51-100 through 581-51-330 and to collect fees for this service.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name Gresham Elementary School
School Food Service
 Mailing Address 1331 NW Eastman Parkway
Gresham, OR 97030
 Phone 669-2501
 Employer ID # or SS # N/A
 Effective Date From Date of Execution
 Termination Date August 31, 1991
 Original Contract Amount \$ _____
 Amount of Amendment \$ _____
 Total Amount of Agreement \$ 470.00

Payment Term

☒ Lump Sum \$ NLT March 31
☐ Monthly \$ _____
☐ Other \$ _____
☐ Requirements contract - Requisition required.
 Purchase Order No. _____
☐ Requirements Not to Exceed \$ _____

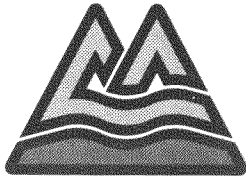
REQUIRED SIGNATURES:

KM Department Manager Duane Tussy (or)
 Purchasing Director
 (Class II Contracts Only) [Signature]
 County Counsel [Signature]
 County Chair/Sheriff [Signature]

Date 12/8/89
 Date _____
 Date 12.11.89
 Date 12/21/89

VENDOR CODE			VENDOR NAME						TOTAL AMOUNT \$		
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	100	010	0232						REV 2799	470.00	
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
HEALTH DIVISION
426 S.W. STARK STREET, 8TH FLOOR
PORTLAND, OREGON 97204
(503) 248-3674
FAX (503) 248-3676

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Gladys McCoy, County Chair

VIA: Duane Zussy, Director *Duane Zussy (pc)*
Department of Human Services

FROM: *Belle* Bill Odegaard, Director
Health Division

DATE: November 29, 1989

SUBJECT: Public School District Inspection Contracts

Recommendation: The Health Division and the Department of Human Services recommend approval of the following contracts for the period from the date of execution to August 31, 1991:

1. ~~Barlow-Gresham Union High School~~
2. Gresham Elementary School

Analysis: The Oregon Board of Education recently adopted food service sanitation rules for public and private schools (OAR 581-51-200 through 581-51-265). The rules require that food service operations in the schools must be inspected by a registered sanitarian who is either an employee or under a contract. These schools have chosen to contract with Multnomah County to meet this requirement. The contract also establishes a fee schedule for the inspections. A total of \$7,040 in revenue (which includes the already participating 20 public and private schools) has been appropriated in County's 89-90 budget. The inspections will be performed by existing staff. Due to the twenty-two (22) contracts involved, the Chair and County Counsel have agreed to multi-year contracts.

Background: County sanitarians have been inspecting these school facilities for years on a goodwill basis. This is the first year of a formal contract with fees with these two schools.

[6152K/p]

SCHOOL FOOD SERVICES
INSPECTION AGREEMENT

THIS AGREEMENT is made and entered into as of the 21st day of December, 1989, by and between Multnomah County, a home rule political subdivision of the State of Oregon (hereinafter referred to as 'COUNTY'), and Gresham Elementary School District (hereinafter referred to as 'SCHOOL DISTRICT').

W I T N E S S E T H :

WHEREAS SCHOOL DISTRICT has the need of a sanitarian for the purpose of inspecting its school food service facilities to comply with Oregon Administrative Rules, and

WHEREAS, COUNTY's Health Division is qualified and willing to provide such services under those terms and conditions set forth; now, therefore,

IN CONSIDERATION of those mutual promises and the terms and conditions set forth hereafter, the parties agree as follows:

1. TERM OF AGREEMENT.

The term of this Agreement shall be from the date of execution, to and including August 31, 1991, unless sooner terminated under the provisions hereof.

2. SERVICES.

COUNTY's services under this Agreement shall consist of the following:

A. COUNTY will furnish the services of a registered sanitarian for the inspection of the SCHOOL DISTRICT's food services facilities in accordance with OAR 581-51-200 through 581-51-255 of the Rules of the State Department of Education.

B. COUNTY will conduct annually at least two complete inspections as well as any necessary follow-up inspections as long as this Agreement is in effect.

C. COUNTY will furnish copies of the inspection and survey reports to SCHOOL DISTRICT's superintendent, building principals, and the State Department of Education promptly upon completion of the inspections.

D. Epidemiological investigations will be carried out by COUNTY upon request by SCHOOL DISTRICT or any member of the public, in order to determine whether or not food borne disease problems exist.

3. COMPENSATION.

A. SCHOOL DISTRICT agrees to pay COUNTY a maximum of \$ 470.00 annually, based upon the following fee schedule:

1. <u>2</u>	Full-service kitchens x \$60 =	<u>\$120.00</u>
2. <u>10</u>	Satellite kitchens x \$35 =	<u>350.00</u>
3. <u> </u>	Serving kitchens only x \$20 =	<u> </u>
4. <u> </u>	Milk only - no fee	
	Total	<u>\$470.00</u>

B. SCHOOL DISTRICT certifies that sufficient funds are available and authorized to finance the costs of this Agreement.

C. SCHOOL DISTRICT will send to COUNTY its annual payment no later than March 31 of each year. Checks must be sent to or delivered to the Director of Environmental Health, 426 S. W. Stark, 2nd Floor, Portland, Oregon 97204.

4. COMPLIANCE WITH LAW.

In connection with its activities under this Agreement, COUNTY agrees to comply with all applicable federal, state, and local laws including, but not limited to laws, rules, and regulations concerning equal employment opportunity, nondiscrimination in service delivery, and affirmative action.

5. WORKERS' COMPENSATION INSURANCE.

COUNTY shall obtain Workers' Compensation coverage for all its workers and employees, either as a carrier-insured employer or a self-insured employer as provided by ORS Chapter 656, prior to the execution of this Agreement. COUNTY further agrees to maintain such coverage for the duration of this Agreement.

6. COUNTY IS INDEPENDENT CONTRACTOR.

A. COUNTY is an independent CONTRACTOR and is solely responsible for the provision of the services as provided under this Agreement. COUNTY, its agents, and employees shall not be considered employees or agents of SCHOOL DISTRICT for any purpose.

B. COUNTY acknowledges responsibility for liability arising out of the performance of this Agreement and shall hold SCHOOL DISTRICT harmless from and indemnify SCHOOL DISTRICT from any and all liability, settlements, loss, costs and expenses in connection with any action, suit or claim resulting or allegedly resulting from services provided pursuant to this Agreement. However, SCHOOL DISTRICT shall hold COUNTY harmless from and indemnify COUNTY from any and all liability, settlements, loss, costs and expenses in connection with any action, suit, or claim resulting or allegedly resulting from the negligence or intentional acts of SCHOOL DISTRICT'S employees or agents.

7. OREGON LAW AND FORUM.

This Agreement shall be construed according to the law of the state of Oregon.

8. MAINTENANCE OF RECORDS.

COUNTY shall maintain records on a current basis to support its billings to SCHOOL DISTRICT. SCHOOL DISTRICT or its authorized representative shall have the authority to inspect, audit, and copy with reasonable notice, and from time to time, any records of COUNTY regarding its billings or its work hereunder. COUNTY shall retain those records for inspection, audit, and copying for three years from the date of completion or termination of this Agreement.

9. TERMINATION.

A. This Agreement may be terminated prior to the expiration of the agreed upon term:

1) immediately by mutual written consent of the parties, or at such time as the parties agree; or

2) by either party upon thirty (30) days written notice to the other, delivered by certified mail or in person.

B. Termination under any provision of this paragraph shall not affect any right, obligation or liability of COUNTY or SCHOOL DISTRICT which accrued prior to such termination.

C. Payment to COUNTY shall be prorated to and include the day of termination and shall be in full satisfaction of all claims by COUNTY against SCHOOL DISTRICT under this Agreement.

10. MODIFICATION.

Any modification of the provisions of this Agreement shall be reduced to writing and signed by the parties.

11. INTEGRATION.

This Agreement contains the entire Agreement between the parties and supercedes all prior written or oral discussions or Agreements.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed by their duly appointed officers on the date first written above.

RATIFIED

GRESHAM GRADE SCHOOL DISTRICT NO. 4
SCHOOL DISTRICT

By: *Orval L. Cure*

Date: 11/13/89

MULTNOMAH COUNTY BOARD
of Commissioners

By: *Gladys McCoy*
Gladys McCoy
Multnomah County Chair

Date: 12/21/89

HEALTH DIVISION

By: *Billi Odegaard*
Billi Odegaard Director

Date: 11/28/89

HEALTH DIVISION

By: *Arthur W. Blum*
Program Manager

Date: 11/21/89

REVIEWED:

LAURENCE KRESSEL
County Counsel for
Multnomah County, Oregon

By: *Laurence Kessel* 12.11.89
Deputy County Counsel



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

MULTNOMAH COUNTY OREGON

FY 89-90

Contract # 102900

Amendment # _____

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input checked="" type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement <u>R-18a</u> <u>12/1/89</u>

Contact Person Kennedy Phone 3674 Date 12-3-89

Department Human Services Division Health Bldg/Room 160/8

Description of Contract This is an agreement allowing the Environmental Health section to inspect school food service facilities in accordance with OAR 581-51-100 through 581-51-330 and to collect fees for this service.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name Gresham Elementary School Food Service
 Mailing Address 1331 NW Eastman Parkway
Gresham, OR 97030
 Phone 669-2501
 Employer ID # or SS # N/A
 Effective Date From Date of Execution
 Termination Date August 31, 1991
 Original Contract Amount \$ _____
 Amount of Amendment \$ 470
 Total Amount of Agreement \$ 470.00

Payment Term

☒ Lump Sum \$ NLT March 31
☐ Monthly \$ _____
☐ Other \$ _____
☐ Requirements contract - Requisition required.
 Purchase Order No. _____
☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager Deane Tussy (cc)
 Purchasing Director
 (Class II Contracts Only) [Signature]
 County Counsel [Signature]
 County Chair/Sheriff [Signature]

Date 12/8/89
 Date [Signature]
 Date 12-11-89
 Date 4/2/91

VENDOR CODE				VENDOR NAME					TOTAL AMOUNT		INC/ DEC IND
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	
01.	100	010	0232						REV 2799	470.00	
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/BID** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT - Requisition Required** - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
23. **LGFS DESCRIPTION** - Abbreviated description for Data Entry purposes.
24. **AMOUNT** - If total dollar amount is being split among different account numbers, indicate dollar amounts here.

SCHOOL FOOD SERVICES
INSPECTION AGREEMENT

THIS AGREEMENT is made and entered into as of the 21st day of December, 1989, by and between Multnomah County, a home rule political subdivision of the State of Oregon (hereinafter referred to as 'COUNTY'), and Gresham Elementary School District (hereinafter referred to as 'SCHOOL DISTRICT').

W I T N E S S E T H :

WHEREAS SCHOOL DISTRICT has the need of a sanitarian for the purpose of inspecting its school food service facilities to comply with Oregon Administrative Rules, and

WHEREAS, COUNTY's Health Division is qualified and willing to provide such services under those terms and conditions set forth; now, therefore,

IN CONSIDERATION of those mutual promises and the terms and conditions set forth hereafter, the parties agree as follows:

1. TERM OF AGREEMENT.

The term of this Agreement shall be from the date of execution, to and including August 31, 1991, unless sooner terminated under the provisions hereof.

2. SERVICES.

COUNTY's services under this Agreement shall consist of the following:

A. COUNTY will furnish the services of a registered sanitarian for the inspection of the SCHOOL DISTRICT's food services facilities in accordance with OAR 581-51-200 through 581-51-265 of the Rules of the State Department of Education.

B. COUNTY will conduct annually at least two complete inspections as well as any necessary follow-up inspections as long as this Agreement is in effect.

C. COUNTY will furnish copies of the inspection and survey reports to SCHOOL DISTRICT's superintendent, building principals, and the State Department of Education promptly upon completion of the inspections.

D. Epidemiological investigations will be carried out by COUNTY upon request by SCHOOL DISTRICT or any member of the public, in order to determine whether or not food borne disease problems exist.

3. COMPENSATION.

A. SCHOOL DISTRICT agrees to pay COUNTY a maximum of \$ 470.00 annually, based upon the following fee schedule:

1. <u>2</u>	Full-service kitchens x \$60 =	<u>\$120.00</u>
2. <u>10</u>	Satellite kitchens x \$35 =	<u>350.00</u>
3. <u> </u>	Serving kitchens only x \$20 =	<u> </u>
4. <u> </u>	Milk only - no fee	
	Total	<u>\$470.00</u>

B. SCHOOL DISTRICT certifies that sufficient funds are available and authorized to finance the costs of this Agreement.

C. SCHOOL DISTRICT will send to COUNTY its annual payment no later than March 31 of each year. Checks must be sent to or delivered to the Director of Environmental Health, 426 S. W. Stark, 2nd Floor, Portland, Oregon 97204.

4. COMPLIANCE WITH LAW.

In connection with its activities under this Agreement, COUNTY agrees to comply with all applicable federal, state, and local laws including, but not limited to laws, rules, and regulations concerning equal employment opportunity, nondiscrimination in service delivery, and affirmative action.

5. WORKERS' COMPENSATION INSURANCE.

COUNTY shall obtain Workers' Compensation coverage for all its workers and employees, either as a carrier-insured employer or a self-insured employer as provided by ORS Chapter 656, prior to the execution of this Agreement. COUNTY further agrees to maintain such coverage for the duration of this Agreement.

6. COUNTY IS INDEPENDENT CONTRACTOR.

A. COUNTY is an independent CONTRACTOR and is solely responsible for the provision of the services as provided under this Agreement. COUNTY, its agents, and employees shall not be considered employees or agents of SCHOOL DISTRICT for any purpose.

B. COUNTY acknowledges responsibility for liability arising out of the performance of this Agreement and shall hold SCHOOL DISTRICT harmless from and indemnify SCHOOL DISTRICT from any and all liability, settlements, loss, costs and expenses in connection with any action, suit or claim resulting or allegedly resulting from services provided pursuant to this Agreement. However, SCHOOL DISTRICT shall hold COUNTY harmless from and indemnify COUNTY from any and all liability, settlements, loss, costs and expenses in connection with any action, suit, or claim resulting or allegedly resulting from the negligence or intentional acts of SCHOOL DISTRICT'S employees or agents.

7. OREGON LAW AND FORUM.

This Agreement shall be construed according to the law of the state of Oregon.

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COUNTY shall maintain records on a current basis to support its billings to SCHOOL DISTRICT. SCHOOL DISTRICT or its authorized representative shall have the authority to inspect, audit, and copy with reasonable notice, and from time to time, any records of COUNTY regarding its billings or its work hereunder. COUNTY shall retain those records for inspection, audit, and copying for three years from the date of completion or termination of this Agreement.

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A. This Agreement may be terminated prior to the expiration of the agreed upon term:

1) immediately by mutual written consent of the parties, or at such time as the parties agree; or

2) by either party upon thirty (30) days written notice to the other, delivered by certified mail or in person.

B. Termination under any provision of this paragraph shall not affect any right, obligation or liability of COUNTY or SCHOOL DISTRICT which accrued prior to such termination.

C. Payment to COUNTY shall be prorated to and include the day of termination and shall be in full satisfaction of all claims by COUNTY against SCHOOL DISTRICT under this Agreement.

10. MODIFICATION.

Any modification of the provisions of this Agreement shall be reduced to writing and signed by the parties.

11. INTEGRATION.

This Agreement contains the entire Agreement between the parties and supercedes all prior written or oral discussions or Agreements.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed by their duly appointed officers on the date first written above.

GRESHAM GRADE SCHOOL DISTRICT NO. 4
SCHOOL DISTRICT

By: Orval L. Cure

Date: 11/13/89

RATIFIED

MULTNOMAH COUNTY, OREGON
**Multnomah County Board
of Commissioners**

By: Gladys McCoy
Gladys McCoy
Multnomah County Chair

Date: 12/21/89

HEALTH DIVISION

By: Billi Odegaard
Billi Odegaard Director

Date: 11/28/89

HEALTH DIVISION

By: Robert W. Blum
Program Manager

Date: 11/21/89

REVIEWED:

LAURENCE KRESSEL
County Counsel for
Multnomah County, Oregon

By: LAZ 12.11.89
Deputy County Counsel

DATE SUBMITTED _____

(For Clerk's Use)

Meeting Date 12/21/89

Agenda No. R-186

REQUEST FOR PLACEMENT ON THE AGENDA

INTERGOVERNMENTAL

Subject: AGREEMENT

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Human Services DIVISION Health

CONTACT Art Bloom TELEPHONE 2404

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Duane Zussy/Scott Clement

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Request Ratification of Intergovernmental Revenue Agreement whereby Barlow-Gresham Union High School agrees to reimburse County for performing semi-annual inspections of food service operations for period upon execution to August 31, 1991.

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☒ RATIFICATION

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA _____

IMPACT:

PERSONNEL

Originals sent to Art Bloom 12/26/89

☐ FISCAL/BUDGETARY

☒ GENERAL FUND \$120

OTHER _____

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: Duane Zussy (w)

BUDGET / PERSONNEL: _____

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) [Signature]

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

FY 89-90

Contract # 102910

Amendment # _____

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input checked="" type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement <div style="text-align: center;"> <p>R-180</p> <p>12/21/89</p> </div>

Contact Person Kennedy Phone 3674 Date 12-3-89

Department Human Services Division Health Bldg/Room 160/8

Description of Contract This is an agreement allowing the Environmental Health section to inspect school food service facilities in accordance with OAR 581-51-100 through 581-51-330 and to collect fees for this service.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name Barlow-Gresham Union High School
School Food Service

Mailing Address 1331 NW Eastman Parkway
Gresham, OR 97030

Phone 669-2501

Employer ID # or SS # N/A

Effective Date From Date of Execution

Termination Date August 31, 1991

Original Contract Amount \$ _____

Amount of Amendment \$ _____

Total Amount of Agreement \$ 120.00

Payment Term _____

☒ Lump Sum \$ NLT March 31

☐ Monthly \$ _____

☐ Other \$ _____

☐ Requirements contract - Requisition required.

Purchase Order No. _____

☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

✓ Department Manager Diane Tussy (w)

Purchasing Director
 (Class II Contracts Only)

County Counsel [Signature]

County Chair/Sheriff [Signature]

Date 12/8/89

Date _____

Date 12.11.89

Date 12/21/89

VENDOR CODE			VENDOR NAME						TOTAL AMOUNT	\$	
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	100	010	0232						REV 2799	120.00	
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
HEALTH DIVISION
426 S.W. STARK STREET, 8TH FLOOR
PORTLAND, OREGON 97204
(503) 248-3674
FAX (503) 248-3676

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Gladys McCoy, County Chair

VIA: Duane Zussy, Director *Duane Zussy (m)*
Department of Human Services

FROM: *B. Odegaard*
Bibi Odegaard, Director
Health Division

DATE: November 29, 1989

SUBJECT: Public School District Inspection Contracts

Recommendation: The Health Division and the Department of Human Services recommend approval of the following contracts for the period from the date of execution to August 31, 1991:

1. Barlow-Gresham Union High School
2. ~~Gresham Elementary School~~

Analysis: The Oregon Board of Education recently adopted food service sanitation rules for public and private schools (OAR 581-51-200 through 581-51-265). The rules require that food service operations in the schools must be inspected by a registered sanitarian who is either an employee or under a contract. These schools have chosen to contract with Multnomah County to meet this requirement. The contract also establishes a fee schedule for the inspections. A total of \$7,040 in revenue (which includes the already participating 20 public and private schools) has been appropriated in County's 89-90 budget. The inspections will be performed by existing staff. Due to the twenty-two (22) contracts involved, the Chair and County Counsel have agreed to multi-year contracts.

Background: County sanitarians have been inspecting these school facilities for years on a goodwill basis. This is the first year of a formal contract with fees with these two schools.

[6152K/p]

SCHOOL FOOD SERVICES
INSPECTION AGREEMENT

THIS AGREEMENT is made and entered into as of the 21st day of December, 1989, by and between Multnomah County, a home rule political subdivision of the State of Oregon (hereinafter referred to as 'COUNTY'), and Barlow-Gresham Union High School District (hereinafter referred to as 'SCHOOL DISTRICT').

W I T N E S S E T H :

WHEREAS SCHOOL DISTRICT has the need of a sanitarian for the purpose of inspecting its school food service facilities to comply with Oregon Administrative Rules, and

WHEREAS, COUNTY's Health Division is qualified and willing to provide such services under those terms and conditions set forth; now, therefore,

IN CONSIDERATION of those mutual promises and the terms and conditions set forth hereafter, the parties agree as follows:

1. TERM OF AGREEMENT.

The term of this Agreement shall be from the date of execution, to and including August 31, 1991, unless sooner terminated under the provisions hereof.

2. SERVICES.

COUNTY's services under this Agreement shall consist of the following:

A. COUNTY will furnish the services of a registered sanitarian for the inspection of the SCHOOL DISTRICT's food services facilities in accordance with OAR 581-51-200 through 581-51-265 of the Rules of the State Department of Education.

B. COUNTY will conduct annually at least two complete inspections as well as any necessary follow-up inspections as long as this Agreement is in effect.

C. COUNTY will furnish copies of the inspection and survey reports to SCHOOL DISTRICT's superintendent, building principals, and the State Department of Education promptly upon completion of the inspections.

D. Epidemiological investigations will be carried out by COUNTY upon request by SCHOOL DISTRICT or any member of the public, in order to determine whether or not food borne disease problems exist.

3. COMPENSATION.

A. SCHOOL DISTRICT agrees to pay COUNTY a maximum of \$ 120.00 annually, based upon the following fee schedule:

1. <u>2</u>	Full-service kitchens x \$60 =	<u>\$120.00</u>
2. <u> </u>	Satellite kitchens x \$35 =	<u> </u>
3. <u> </u>	Serving kitchens only x \$20 =	<u> </u>
4. <u> </u>	Milk only - no fee	
Total		<u>\$120.00</u>

B. SCHOOL DISTRICT certifies that sufficient funds are available and authorized to finance the costs of this Agreement.

C. SCHOOL DISTRICT will send to COUNTY its annual payment no later than March 31 of each year. Checks must be sent to or delivered to the Director of Environmental Health, 426 S. W. Stark, 2nd Floor, Portland, Oregon 97204.

4. COMPLIANCE WITH LAW.

In connection with its activities under this Agreement, COUNTY agrees to comply with all applicable federal, state, and local laws including, but not limited to laws, rules, and regulations concerning equal employment opportunity, nondiscrimination in service delivery, and affirmative action.

5. WORKERS' COMPENSATION INSURANCE.

COUNTY shall obtain Workers' Compensation coverage for all its workers and employees, either as a carrier-insured employer or a self-insured employer as provided by ORS Chapter 656, prior to the execution of this Agreement. COUNTY further agrees to maintain such coverage for the duration of this Agreement.

6. COUNTY IS INDEPENDENT CONTRACTOR.

A. COUNTY is an independent CONTRACTOR and is solely responsible for the provision of the services as provided under this Agreement. COUNTY, its agents, and employees shall not be considered employees or agents of SCHOOL DISTRICT for any purpose.

B. COUNTY acknowledges responsibility for liability arising out of the performance of this Agreement and shall hold SCHOOL DISTRICT harmless from and indemnify SCHOOL DISTRICT from any and all liability, settlements, loss, costs and expenses in connection with any action, suit or claim resulting or allegedly resulting from services provided pursuant to this Agreement. However, SCHOOL DISTRICT shall hold COUNTY harmless from and indemnify COUNTY from any and all liability, settlements, loss, costs and expenses in connection with any action, suit, or claim resulting or allegedly resulting from the negligence or intentional acts of SCHOOL DISTRICT'S employees or agents.

7. OREGON LAW AND FORUM.

This Agreement shall be construed according to the law of the state of Oregon.

8. MAINTENANCE OF RECORDS.

COUNTY shall maintain records on a current basis to support its billings to SCHOOL DISTRICT. SCHOOL DISTRICT or its authorized representative shall have the authority to inspect, audit, and copy with reasonable notice, and from time to time, any records of COUNTY regarding its billings or its work hereunder. COUNTY shall retain those records for inspection, audit, and copying for three years from the date of completion or termination of this Agreement.

9. TERMINATION.

A. This Agreement may be terminated prior to the expiration of the agreed upon term:

- 1) immediately by mutual written consent of the parties, or at such time as the parties agree; or
- 2) by either party upon thirty (30) days written notice to the other, delivered by certified mail or in person.

B. Termination under any provision of this paragraph shall not affect any right, obligation or liability of COUNTY or SCHOOL DISTRICT which accrued prior to such termination.

C. Payment to COUNTY shall be prorated to and include the day of termination and shall be in full satisfaction of all claims by COUNTY against SCHOOL DISTRICT under this Agreement.

10. MODIFICATION.

Any modification of the provisions of this Agreement shall be reduced to writing and signed by the parties.

11. INTEGRATION.

This Agreement contains the entire Agreement between the parties and supercedes all prior written or oral discussions or Agreements.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed by their duly appointed officers on the date first written above.

Barlow-Gresham Union High School
District No. U2-20 Jt.

SCHOOL DISTRICT

By

Orval L. Anne

Date:

11/13/89

RATIFIED

MULTNOMAH COUNTY Board
of Commissioners

By

Gladys McCoy
Multnomah County Chair

Date:

12/2/89

HEALTH DIVISION

By

Billi Odegaard
Billi Odegaard, Director

Date:

11/28/89

HEALTH DIVISION

By

Arthur W. Blum
Program Manager

Date:

11/21/89

REVIEWED:

LAURENCE KRESSEL
County Counsel for
Multnomah County, Oregon

By

[Signature]
Deputy County Counsel

12.11.89



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM (See Administrative Procedure #2106)

FY 89-90

Contract # 102910

Amendment # _____

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input checked="" type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement <u>R-150</u> <u>12/21/89</u>

Contact Person Kennedy Phone 3674 Date 12-3-89
 Department Human Services Division Health Bldg/Room 160/8
 Description of Contract This is an agreement allowing the Environmental Health section to inspect school food service facilities in accordance with OAR 581-51-100 through 581-51-330 and to collect fees for this service.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____
 ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name Barlow-Gresham Union High School
School Food Service
 Mailing Address 1331 NW Eastman Parkway
Gresham, OR 97030
 Phone 669-2501
 Employer ID # or SS # N/A
 Effective Date From Date of Execution
 Termination Date August 31, 1991
 Original Contract Amount \$ _____
 Amount of Amendment \$ _____
 Total Amount of Agreement \$ 120.00

Payment Term

☒ Lump Sum \$ NLT March 31, 1991
☐ Monthly \$ _____
☐ Other \$ _____
☐ Requirements contract - Requisition required.
 Purchase Order No. _____
☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager Diane Tussy
 Purchasing Director
 (Class II Contracts Only)
 County Counsel [Signature]
 County Chair/Sheriff [Signature]

Date 12/8/89
 Date [Signature]
 Date 12-11-89
 Date 12/21/89

VENDOR CODE			VENDOR NAME						TOTAL AMOUNT		\$
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	100	010	0232						REV 2799	120.00	
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/BID** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT** - Requisition Required - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
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SCHOOL FOOD SERVICES
INSPECTION AGREEMENT

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	Total	<u>\$120.00</u>

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This Agreement contains the entire Agreement between the parties and supercedes all prior written or oral discussions or Agreements.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed by their duly appointed officers on the date first written above.

Barlow-Gresham Union High School
District No. U2-20 Jt.

SCHOOL DISTRICT

By: Orval L. Anne

Date: 11/13/89

RATIFIED

MULTNOMAH COUNTY Board
of Commissioners

By: Gladys McCoy
Gladys McCoy
Multnomah County Chair

Date: 12/2/89

HEALTH DIVISION

By: Billi Odegaard
Billi Odegaard, Director

Date: 11/28/89

HEALTH DIVISION

By: William W. Blum
Program Manager

Date: 11/21/89

REVIEWED:

LAURENCE KRESSEL
County Counsel for
Multnomah County, Oregon

By: Laurence Kessel 12.11.89
Deputy County Counsel

DATE SUBMITTED _____

(For Clerk's Use)
Meeting Date 12/21/89
Agenda No. R-19

REQUEST FOR PLACEMENT ON THE AGENDA

Subject: Ratification of IGA

Informal Only* _____
(Date)

Formal Only _____
(Date)

DEPARTMENT Human Services DIVISION Social Services

CONTACT Susan Clark TELEPHONE 248-3691

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD _____

BRIEF SUMMARY Should include other alternatives explored, if applicable, and clear statement of rationale for the action requested.

Ratification of an IGA contract amendment between Alcohol Treatment and Training Center-OHSU and Multnomah County Alcohol & Drug Program Office. State Alcohol & Drug Program is increasing the maximum number of payable hours for level II diversion and convicted clients from 36 to 40. Amendment also pays for interpreter for hearing impaired DUII clients. Shifts Title XIX revenue from alcohol outpatient to drug-free outpatient services.

(IF ADDITIONAL SPACE IS NEEDED, PLEASE USE REVERSE SIDE)

ACTION REQUESTED:

☐ INFORMATION ONLY ☐ PRELIMINARY APPROVAL ☐ POLICY DIRECTION ☐ RATIFICATION

INDICATE THE ESTIMATED TIME NEEDED ON AGENDA _____

IMPACT:

PERSONNEL

☒ FISCAL/BUDGETARY Org. 1417-Requirements, Title XIX

☐ -General Fund

Other State/Federal

SIGNATURES:

DEPARTMENT HEAD, ELECTED OFFICIAL, or COUNTY COMMISSIONER: Diane Tussy (PD)

BUDGET / PERSONNEL /

COUNTY COUNSEL (Ordinances, Resolutions, Agreements, Contracts) _____

OTHER _____
(Purchasing, Facilities Management, etc.)

NOTE: If requesting unanimous consent, state situation requiring emergency action on back.

1989 DEC 13 AM 9:03
MULTNOMAH COUNTY
CLERK OF COUNTY COMMISSIONERS



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
SOCIAL AND FAMILY SERVICES DIVISION
ADMINISTRATIVE OFFICES
426 S.W. STARK ST., 6TH FLOOR
PORTLAND, OREGON 97204
(503) 248-3691

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Gladys McCoy
Multnomah County Chair

VIA: Duane Zussy *Duane Zussy (LSD)*
Director, Department of Human Services

FROM: Gary Smith *DS*
Director, Social Services

DATE: November 21, 1989

SUBJECT: Recommendation to ^{Approve} Alcohol Treatment and Training Center Amendment #1.

RETROACTIVE STATUS: The Multnomah County Alcohol and Drug Program Office received notification on November 13, 1989 that the State Alcohol and Drug Program office had increased the maximum number of payable hours for Level II Diversion and Level II Convicted DUII clients from 36 to 40 hours, effective July 1, 1989. In the same memo, the State Office announced approval to reimburse for interpreters for hearing impaired indigent and partially indigent DUII clients, effective July 1, 1989. The County Alcohol and Drug Office initiated change orders for all DUII providers as soon as notification was received from the State.

RECOMMENDATION: Social Services Division recommends County Chair approval of a Change Orders between the Alcohol and Drug Program Office and Alcohol Treatment and Training Center for the period July 1, 1989 through June 30, 1990.

ANALYSIS: Change Orders increase the maximum number of payable hours for Level II Diversion and Level II convicted DUII clients as appropriated by the State of Oregon DUII Program. The funds are not allocated by the State but, are paid on a reimbursement basis. Transfers Title XIX revenue from alcohol outpatient services to drug-free outpatient services.



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM

(See instructions on reverse side)

DHS# 104-1

FY89-90

TYPE I

- ☐ Professional Services under \$10,000
☐ Revenue
☐ Grant Funding
☒ Intergovernmental Agreement

Amendment # 1 to Contract # 101040

TYPE II

- ☐ Professional Services over \$10,000 (RFP, Exemption)
☐ PCRB Contract
☐ Maintenance Agreement
☐ Licensing Agreement
☐ Construction

Amendment # _____ to Contract # _____

Contact Person Susan Clark Phone 248-3691 Date 11/20/89Department Human Services Division Social Services Bldg/Room 160/6

Description of Contract Increases maximum number of payable hours for level II diversion and convicted clients from 36 to 40 hours. Allows state A&D office to pay for interpreter services for hearing impaired clients. Shifts TITLE XIX revenues from alcohol outpatient service to drug-free outpatient services.

RFP/BID # N/A - IGA Date of RFP/BID _____ Exemption Exp. Date _____ORS/AR # _____ Contractor is ☐ MBE ☐ FBE ☐ QRFContractor Name Alcohol Treatment and Training Center - OHSUMailing Address 732 SW 3rd, 6th FloorPortland, OR 97204Phone 229-5420Employer ID# or SS# 93-6001-786WEffective Date July 1, 1989Termination Date June 30, 1990Original Contract Amount \$ Requirements

Amount of Amendment \$ _____

Total Amount of Agreement \$ Requirements

Payment Terms

- ☐ Lump Sum \$ _____
☒ Monthly \$ Reimbursement
☐ Other \$ _____

☐ Requirements contract-requisition required

Purchase Order No. _____

Required Signatures:

Department Head Duane Hussy CPCDate 11/28/89Purchasing Director _____
(Type II Contracts Only)

Date _____

County Counsel _____

Date _____

Budget Office _____

Date _____

County Executive/Sheriff _____

Date _____

TRANSACTION CODE	P O	AGENCY	PO DATE	ACCOUNTING PERIOD	BUDGET FY	ACTION			
VENDOR CODE		VENDOR NAME		TOTAL AMOUNT	\$				
LINE NO.	CONTRACT NUMBER	FUND AGENCY	ORGANIZATION	ACTIVITY OBJECT	SUB OBJ	REPT CATEG	DESCRIPTION	AMOUNT	INC/DEC IND
		156 010	1417	AD67	6060	1467		\$ XXXXX,000.00	
		156 010	1417	AD67	6060	1467		\$ XXXXX,000.00	
	101040-1	156 010	1417	AD67	6060	1467		\$ Require.	
		SEE ATTACHED					\$		

RECEIVED
PURCHASE SECTION

89 DEC -8 AM 8:03

MULTNOMAH COUNTY

[illegible]

3955B

MULTNOMAH COUNTY
SOCIAL SERVICES DIVISION
CONTRACT AMENDMENT NUMBER 1

DURATION OF AGREEMENT: July 1, 1989 TO: June 30, 1990
CONTRACTOR Name: ALCOHOL TREATMENT AND TRAINING CENTER Telephone: 229-5420
CONTRACTOR Address: 732 SW 3RD, 6TH FLOOR IRS #: 93-6001-786W
PORTLAND, OREGON 97204 TITLE XIX #: 002923

This amendment to the contract for social services is made between the Multnomah County Social Services Division referred to as the "COUNTY" and Alcohol Treatment and Training Center, referred to as the "CONTRACTOR." It is understood by the parties that all conditions and agreements in the original contract not superseded in this amendment are still in force and apply to this amendment.

I. SERVICES UNDER FEE FOR SERVICES

- A) CONTRACTOR agrees to provide services for DUII clients within the service element(s) listed below. COUNTY agrees to pay the CONTRACTOR for services billed at the rates and up to the amount(s) specified below.

<u>Service Element</u>	<u>Fund Source</u>	<u>Current Amount</u>	<u>Change</u>	<u>Revised Amount</u>
Alcohol Diversion Services DUII Level I (A&D 67)	State	\$81.84 per eligible client	0	\$81.84 per eligible indigent client
Alcohol Diversion Services DUII Level I (A&D 67)	State	\$40.92 per eligible client	0	\$40.92 per eligible partially indigent client
Alcohol Diversion Services DUII Level II (A&D 68)	State	\$408.96 per eligible client	+45.44	\$454.40 per eligible indigent client
Alcohol Diversion Services DUII Level II (A&D 68)	State	\$204.48 per eligible client	+22.72	\$227.20 per eligible partially indigent client
Alcohol Diversion Services DUII Convicted Level I (A&D 77)	State	\$81.84 per eligible client	0	\$81.84 per eligible indigent client
Alcohol Diversion Services DUII Convicted Level I (A&D 77)	State	\$40.92 per eligible client	0	\$40.92 per eligible partially indigent client
Alcohol Diversion Services DUII Convicted Level II (A&D 78)	State	\$408.96 per eligible client	+45.44	\$454.40 per eligible indigent client
Alcohol Diversion Services DUII Convicted Level II (A&D 78)	State	\$204.48 per eligible client	+22.72	\$227.20 per eligible partially indigent client

ALCOHOL TREATMENT AND TRAINING CENTER
Contract Amendment Number 1

B) COUNTY agrees to reimburse the CONTRACTOR for interpreter services for hearing impaired indigent or partially indigent clients, in addition to reimbursement for DUII treatment services. Reimbursement is limited to the maximum allowable hours, i.e. 12 hours for SE 67 and 77 (Level I) and 40 hours for SE 68 and 78 (Level II).

<u>Service Element</u>	<u>Fund Source</u>	<u>Type of Units/ Slots</u>	<u>Rates Per Units/ Slots</u>	<u>Maximum Total Payable Per Client</u>
Alcohol Diversion Services Hearing Impaired DUII Level I (A&D 67)	State	Hours of Client Service	\$31.82 per hour (6.82 + 25.00 interpreter)	\$381.84 per eligible indigent client
Alcohol Diversion Services Hearing Impaired DUII Level I (A&D 67)	State	Hours of Client Service	\$15.91 per hour (3.41 + 12.50 interpreter)	\$190.92 per eligible partially indigent client
Alcohol Diversion Services Hearing Impaired DUII Level II (A&D 68)	State	Hours of Client Service	\$36.36 per hour (11.36 + 25.00 interpreter)	\$1,454.40 per eligible indigent client
Alcohol Diversion Services Hearing Impaired DUII Level II (A&D 68)	State	Hours of Client Service	\$18.18 per hour (5.68 + 12.50 interpreter)	\$727.20 per eligible partially indigent client
Alcohol Diversion Services Hearing Impaired DUII Convicted Level I (A&D 77)	State	Hours of Client Service	\$31.82 per hour (6.82 + 25.00 interpreter)	\$381.84 per eligible indigent client
Alcohol Diversion Services Hearing Impaired DUII Convicted Level I (A&D 77)	State	Hours of Client Service	\$15.91 per client (3.41 + 12.50 interpreter)	\$190.92 per eligible partially indigent client
Alcohol Diversion Services Hearing Impaired DUII Convicted Level II (A&D 78)	State	Hours of Client Service	\$36.36 per hour (11.36 + 25.00 interpreter)	\$1,454.40 per eligible indigent client
Alcohol Diversion Services Hearing Impaired DUII Convicted Level II (A&D 78)	State	Hours of Client Service	\$18.18 per hour (5.68 + 12.50 interpreter)	\$727.20 per eligible partially indigent client

PURPOSE OF AMENDMENT

This contract amendment reflects an increase in the maximum number of payable hours for Level II Diversion and Level II Convicted clients from 36 to 40 hours. The contract amendment is effective retroactive to July 1, 1989.

ALCOHOL TREATMENT AND TRAINING CENTER
Contract Amendment Number 1

The contract amendment also reflects a decision on the part of the State Alcohol and Drug Program Office to allow the Intoxicated Driver Program Fund to pay for interpreter services, in addition to treatment services, for hearing impaired indigent and partially indigent DUII clients. Reimbursement is limited to the maximum allowable hours (12 hours for Level I and 40 hours for Level II) regardless of the length of treatment delivered. The contract amendment is effective retroactive to July 1, 1989.

SPECIAL CONDITIONS

1. Hearing impaired indigent and partially indigent DUII clients will be billed through the CPMS system, using the TSR as the billing document with the following eligibility codes:

<u>Service Element</u>	<u>Eligibility Code</u>
67, 77	Indigent: 047
	Partially Indigent: 048
68, 78	Indigent: 047
	Partially Indigent: 048

II. TITLE XIX BILLING ALLOCATION

Subject to the General Conditions and Special Conditions in the original agreement, the CONTRACTOR agrees to provide Title XIX services within the service element(s) specified below. CONTRACTOR is a performing provider meeting standards prescribed by OAR 309-16-000 through 115, and the rules applicable to each service element specified below. Payments for Title XIX services will be billed to and paid by the State Adult and Family Services Division (AFSD).

<u>Service Element</u>	<u>Fund Source</u>	<u>Current Amount</u>	<u>Change</u>	<u>Revised Amount</u>
Alcohol Outpatient (A&D 64)	Title XIX Revenue Allocation	\$ 20,000	-12,000	\$ 8,000
Drug-Free Outpatient (A&D 65)	Title XIX Revenue Allocation	0	+12,000	\$12,000
Total		<u>20,000</u>	<u>12,000</u>	<u>20,000</u>

PURPOSE OF AMENDMENT

The contract amendment provides for the shifting of \$12,000 in Title XIX Revenue Allocation that was previously designated for alcohol outpatient services for medicaid eligible clients to drug-free outpatient services for medicaid eligible clients. This contract amendment comes as a result of the CONTRACTOR's request. This contract amendment is made retroactive to July 1, 1989 to allow CONTRACTOR to be reimbursed for services provided to medicaid eligible drug clients. This retroactivity is in keeping with and is allowable by State Medicaid Regulations. This contract amendment has no fiscal impact on CONTRACTOR's total Title XIX Revenue Allocation.

ALCOHOL TREATMENT AND TRAINING CENTER
Contract Amendment Number 1

CONTRACTOR:

MULTNOMAH COUNTY, OREGON:

By _____
Tom Ten Eyck, Director
Alcohol Treatment and
Training Center

Date

By Norma D. Jaeger 11-21-89
Norma D. Jaeger, Manager
Alcohol and Drug Program

Date

By _____
Board Chairperson
Alcohol Treatment and
Training Center

Date

By Gary W. Smith 11/22/89
Gary W. Smith, Director
Social Services Division

Date

By Gladys McCoy 12/21/89
Gladys McCoy
Multnomah County Chair

Date

REVIEWED:

Laurence Kressel
Multnomah County Counsel

By _____
Deputy County Counsel

Date

[3133Z]



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM

(See instructions on reverse side)

DHS# 104-1

FY89-90

TYPE I

- ☐ Professional Services under \$10,000
☐ Revenue
☐ Grant Funding
☒ Intergovernmental Agreement

Amendment # 1 to Contract # 101040

TYPE II

- ☐ Professional Services over \$10,000 (RFP, Exemption)
☐ PCRB Contract
☐ Maintenance Agreement
☐ Licensing Agreement
☐ Construction

Amendment # _____ to Contract # _____

Contact Person Susan Clark Phone 248-3691 Date 11/20/89Department Human Services Division Social Services Bldg/Room 160/6

Description of Contract Increases maximum number of payable hours for level II diversion and convicted clients from 36 to 40 hours. Allows state ASD office to pay for interpreter services for hearing impaired clients. Shifts TITLE XIX revenues from alcohol outpatient services to drug-free outpatient services.

RFP/BID # N/A - IGA Date of RFP/BID _____ Exemption Exp. Date _____ORS/AR # _____ Contractor is ☐ MBE ☐ FBE ☐ QRFContractor Name Alcohol Treatment and Training Center - OHSUMailing Address 732 SW 3rd, 6th FloorPortland, OR 97204Phone 229-5420Employer ID# or SS# 93-6001-786WEffective Date July 1, 1989Termination Date June 30, 1990Original Contract Amount \$ Requirements

Amount of Amendment \$ _____

Total Amount of Agreement \$ Requirements

Payment Terms

- ☐ Lump Sum \$ _____
☒ Monthly \$ Reimbursement
☐ Other \$ _____

☐ Requirements contract-requisition required
 Purchase Order No. _____

Required Signatures:

Department Head Duane Anney (w)Date 11/28/89
 Purchasing Director _____
 (Type II Contracts Only)

Date _____

County Counsel [Signature]Date 12.1.89

Budget Office _____

Date _____

County Executive/Sheriff [Signature]Date 1/1/90

TRANSACTION CODE	P.O.	AGENCY	PO DATE	m m d d y y	ACCOUNTING PERIOD	m m y y	BUDGET FY	y y	ACTION		
VENDOR CODE		VENDOR NAME			TOTAL AMOUNT		\$		<input type="checkbox"/> Original Entry (E) <input type="checkbox"/> Adjustment (M)		
LINE NO.	CONTRACT NUMBER	FUND	AGENCY	ORGANIZATION	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	DESCRIPTION	AMOUNT	INC/DEC IND
		156	010	1417	AD67	6060		1467		\$ Require.	
		SEE ATTACHED									

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **TYPE I, TYPE II** — Check off appropriate type of contract in one of the two boxes on top of form. Note: Type II contracts need to be routed through Purchasing Director, Type I does not. If Amendment, enter contract number of original agreement and original contract amount.
2. **CONTACT PERSON, PHONE** — Enter name and phone number of person initiating contract from responsible County department.
3. **DATE** — Enter date contract and Contract Approval Form submitted for approval and execution.
4. **DEPARTMENT, DIVISION, BLDG/ROOM** — List appropriate County department and division responsible and interoffice mail code.
5. **DESCRIPTION OF CONTRACT** — Summary of product purchased or services to be performed. Note if an amendment or extension.
6. **RFD/BID #** — Enter number if contract is result of RFP/Bid selection process.
7. **DATE OF RFP/BID** — Enter date of RFP/BID public opening.
8. **DATE OF EXEMPTION** — Enter date exemption from competitive bidding granted by BCC.
9. **REVIEWED FOR MINORITY/FEMALE BUSINESS** — Check appropriate box if County sought business from MBE or FBE firm(s).
10. **CONTRACTOR IS MBE OR FBE** — Check appropriate box if contractor is certified as an MBE or FBE.
11. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** — Enter current information.
12. **EMPLOYER ID# OR SS#** — Enter employer ID# or social security number if Contractor is individual.
13. **EFFECTIVE DATE** — Date contract states to begin services.
14. **TERMINATION DATE** — Date contract states services terminated.
15. **TOTAL AMOUNT OF AGREEMENT** — Enter amount of agreement being submitted. If Amendment, enter amount of increase/decrease only.
16. **PAYMENT TERMS** — Designate payment terms by checking appropriate box and entering dollar amount.
17. **REQUIREMENTS CONTRACT — REQUISITION REQUIRED** — Check this box to note that a Purchase Order will be issued to trigger payment.
18. **PURCHASE ORDER NO.** — Enter number of Purchase Order to be issued. If number is not known, enter "P.O. will be issued."
19. **REQUIRED SIGNATURES** — To be completed as approved. Purchasing Director needs to sign for Type II contracts only.
20. **AGENCY** — Enter your Department's agency number.
21. **VENDOR NAME** — Enter Contractor name as entered above.
22. **TOTAL AMOUNT** — Enter total dollar amount of contract.
23. **CONTRACT NUMBER** — Purchasing will enter all new contract numbers. If contract extension or amendment, initiator should enter current contract number.
24. **ACCOUNT CODE STRUCTURE** — Enter Account Code structure for the type of agreement, i.e., expense or revenue.
25. **DESCRIPTION** — Optional.
26. **AMOUNT** — If total dollar amount is being split among different account numbers indicate dollar amounts here.

ATTACHMENT

Fund	Agency	Org.	Activity	Object	R/C	Amount
156	010	1417	AD68	6060	1468	Require
156	010	1417	AD77	6060	1477	Require
156	010	1417	AD78	6060	1478	Require

3955B

BUDGET MODIFICATION NO. DHS#25(For Clerk's Use) Meeting Date 12/21/89
Agenda No. R-201. REQUEST FOR PLACEMENT ON THE AGENDA FOR Dec. 21, 1989

(Date)

DEPARTMENT Human ServicesDIVISION Juvenile JusticeCONTACT Harold OgburnTELEPHONE 248-3460*NAME(S) OF PERSON MAKING PRESENTATION TO BOARD Duane Zussy

SUGGESTED

AGENDA TITLE (to assist in preparing a description for the printed agenda)

DHS budget modification #25, moves \$2,400 from Materials & Services category to Capital Outlay for the purchase of a Wang Word Processing System upgrade.

(Estimated Time Needed on the Agenda)

2. DESCRIPTION OF MODIFICATION (Explain the changes this Bud Mod makes. What budget does it increase? What do the changes accomplish? Where does the money come from? What budget is reduced? Attach additional information if you need more space.)

☐ PERSONNEL CHANGES ARE SHOWN IN DETAIL ON THE ATTACHED SHEET

This budget modification will enable the Division to purchase a new Wang Word Processing System. This is a system upgrade, which gives the Division the ability to interface with the Department of Human Services's system, resulting in on line sharing of information, and documentation, greater accessibility in the annual budget preparation process, more memory capability, and additional workstations.

The total cost of the system is \$1,870, and we will purchase an additional printer for \$499. This budget modification transfers \$1,400 from Counseling's Communications Budget, and \$1,000 from it's Professional Services budget into Management Support's Equipment-Capital Improvement Budget.

RECEIVED
CLERK OF
JUDICIAL COMMISSION
CLERK
DEC 12 AM 10:15
CLERK
CLERK
OREGON

3. REVENUE IMPACT (Explain revenues being changed and the reason for the change)

None

original
Sent 12/20/89

4. CONTINGENCY STATUS (to be completed by Finance/Budget)

N/A

(Specify Fund) Contingency before this modification (as of _____) \$ _____
(Date)

After this modification \$ _____

Originated By

Date

Harold Ogburn12/1/89

Finance/Budget

Date

Thomas J. Soper12/8/89

Board Approval

MEMORAH ROCKERS

Department Director

Date

Duane Zussy (per)12/7/89

Employee Relations

Date

Date

12/21/89

EXPENDITURE
TRANSACTION EB []

GM [] TRANSACTION DATE_____

ACCOUNTING PERIOD _____

BUDGET FY_____

Document
Number

Action Fund Agenc

Organic -

Reporting

Object

Current
Amount

Revised
Amount

Change
Increase
(Decrease)

Sub-
Total

Description

[illegible]

TOTAL EXPENDITURE CHANGE

- 0 -

TOTAL EXPENDITURE CHANGE

REVENUE
TRANSACTION RB []

GM [] TRANSACTION DATE_____

ACCOUNTING PERIOD _____

BUDGET FY_____

Document
Number

Action Fund Agency:

Organi-

Reporting

Revenue
Source

Current
Amount

Revised
Amount

Change
Increase
(Decrease)

Sub-Total

Description

[illegible]

TOTAL REVENUE CHANGE

- 0 -

TOTAL REVENUE CHANGE



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
JUVENILE JUSTICE DIVISION
1401 N.E. 68th
PORTLAND, OREGON 97213
(503) 248-3460

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

M E M O R A N D U M

TO: Multnomah County
Board of County Commissioners

VIA: Duane Zussy, Director *Duane Zussy (usc)*
Department Of Human Services

FROM: *H* Harold Ogburn, Director
Juvenile Justice Division

DATE: December 1, 1989

SUBJECT: RECOMMENDATION FOR APPROVAL OF BUDGET MODIFICATION

RECOMMENDATION: The Juvenile Justice Division recommends Board approval of budget modification DHS #25, which transfers funds between object categories, for the purchase of a new Wang Word Processing System.

ANALYSIS & BACKGROUND: The Juvenile Justice Division currently uses an older model Wang System, which costs in excess of \$5,000 per year for maintenance. This system is limited in it's ability to interface with the system currently used by DHS, and DGS, in it's ability to perform simplistic word processing functions, and it does not allow us to cost effectively add additional work stations.

Bob Mabry, the Department's Management Information Manager, has secured a purchasing price of \$1,870 for an upgraded system. In addition, we will purchase a new Panasonic Printer for \$499.

We seek the Board's approval of this budget modification which will transfer \$1,400 from Counseling (Field Probation I) Communications Budget, and \$1,000 from (Field Probation II) Professional Services Budget into Management Support's Capitol Improvement budget, for the purpose of purchasing a new Word Processing System.

BUDGET MODIFICATION NO. DHS #26

(For Clerk's Use) Meeting Date 12/21/89
Agenda No. R-01

1. REQUEST FOR PLACEMENT ON THE AGENDA FOR Dec. 21, 1989

(Date)

DEPARTMENT Human Services

DIVISION Social Services

CONTACT Susan Clark

TELEPHONE 248-3691

*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Duane Zussy

SUGGESTED

AGENDA TITLE (to assist in preparing a description for the printed agenda)

Budget modification DHS # 26 adjusts revenue and expenditures in the Children's Clinical Services budget to reflect actual program operating costs.

(Estimated Time Needed on the Agenda)

2. DESCRIPTION OF MODIFICATION (Explain the changes this Bud Mod makes. What budget does it increase? What do the changes accomplish? Where does the money come from? What budget is reduced? Attach additional information if you need more space.)

[X] PERSONNEL CHANGES ARE SHOWN IN DETAIL ON THE ATTACHED SHEET

Budget modification DHS # 26 requests Board approval to increase the Children's Clinical Services budget a net total of \$40,460 to reflect increases in overall school revenue received. Personnel, related M&S, telephone and building management object codes are increased to reflect the increased hours of SMH consultation and additional staff.

In addition, a number of positions are adjusted to reflect changes which have occurred since the budget was prepared.

original sent 12/20/89

3. REVENUE IMPACT (Explain revenues being changed and the reason for the change)

Parkrose School dist. revenue decreased by (\$10,813)	Svc. Reimb. F/S to Bldg. Mgmt. increased by \$8,505
Portland Public Schools revenue decreased by (\$1,334)	
Gresham/Barlow High School revenue increased by \$13,387	Svc. Reimb. F/S to Telephone increased by \$1,124
Gordon Russell School revenue increased by \$14,872	
Dexter McCarty School revenue increased by \$251	
Centennial School district revenue increased by \$24,097	
Cash Transfer from GF to F/S increased \$2,127 (Indirect)	
Service Reimbursement F/S to GF increased by \$2,127 (Indirect)	
Service Reimbursement F/S to Insurance decreased by (\$943)	

4. CONTINGENCY STATUS (to be completed by Finance/Budget)
Contingency before this modification (as of _____) (Date)
(Specify Fund) _____

After this modification

Originated By

Date

Department Manager

Date

Susan Clark

12/7/89

Duane Zussy

12/8/89

Budget Analyst

Date

Personnel Analyst

Date

Thomas Suppe

12/8/89

Gerald W. Bittle

12-8-89

Board Approval

Date

REBORAH ROGERS

12/21/89

PERSONNEL DETAIL FOR BUD MOD NO. DHS#26

5. ANNUALIZED PERSONNEL CHANGES (Compute on a full year basis even though this action affects only a part of the fiscal year.)

FTE Increase (Decrease)	POSITION TITLE	Annualized			
		BASE PAY Increase (Decrease)	FRINGE Increase (Decrease)	INSURANCE Increase (Decrease)	TOTAL Increase (Decrease)
1.00	Program Development Spec.	26,187	6,615	3,519	36,321
1.00	Human Svc. Spec.	33,450	8,449	5,055	46,954
.66	SMHC	17,819	4,501	3,113	25,433
.41	SMHC	11,137	2,813	921	14,871
.41	SMHC	10,114	2,555	1,311	13,980
.83	Teen Clinic (New, two .25 for 6 mos. up to one .83 for 10 mos.)	20,227	5,109	3,112	28,448
.41	Teen Clinic (New, one .25 for 6 mos. up to one .83 fo 10 mos.)	10,114	2,555	1,556	14,225
.83	SMHC (New contract with Centennial)	20,227	5,109	3,112	28,448
.66	SMHC (Additions to GHS G. Russell)	16,182	4,087	2,990	23,259
1.00	PMI	38,875	9,820	4,249	52,944
TOTAL CHANGE (ANNUALIZED)		204,332	51,613	28,938	284,883

6. CURRENT YEAR PERSONNEL DOLLAR CHANGES (calculate costs or savings that will take place within this fiscal year; these should explain the actual dollar amounts being changed by this Bud Mod.)

Full Time Positions, Part-Time, Overtime, or Premium	Explanation of Change	Current FY			
		BASE PAY Increase (Decrease)	FRINGE Increase (Decrease)	INSURANCE Increase (Decrease)	TOTAL Increase (Decrease)
Full Time	Increase PDS from .7 to 1.0 adjusted for turnover (Brady)	+422	(2,227)	(163)	(1,968)
Part Time	Reduce SMH Consultant from .83 to .66 FTE (DeCourcy) 32 hrs/wk for 43 weeks	(5,784)	(1,461)	+92*	(7,153)
Part Time	Reduce SMH Consultant from .5 to .41 FTE (Lovrien)	(976)	(246)	(1,090)	(2,312)
Full Time	Reclass HSS to PMI and adjust for temporary vacancy (Pump)	(5,044)	(5,296)	(1,350)	(11,690)
Full Time	Reclass Lead SMH Consultant HSS (Gratton)	+997	+367	+312	+1,676
Full Time	Adjust vacant SMH Consultant position to reflect actual hire date (Frank, McCan, Lynch)	(8,845)	(6,555)	(2,810)	(18,210)
Part Time	Adjust calculation of SMH Consultant from .25 full year to .5 FTE A/O 1/1/90 (vacant)	(558)	+2,045	(342)	+1,145
Full Time	Adjust calculation of 2 SMH Consultants from .25 each full year to 1 position at 1.0 FTE A/O 1/1/90 (vacant)	(280)	+1,023	(170)	+573
Full Time	Add new SMH Consultant position at .83 FTE for Centennial (Alexander)	+18,816	+4,753	+2,351	+25,920
Part Time	Add new SMH Consultant position at .66 FTE for G. Russell	+14,676	+3,707	+2,227	+20,610
* Insurance calculated incorrectly in original budget		+13,424	(3,890)	(943)	+8,591

EXPENDITURE

TRANSACTION EB []

GM []

TRANSACTION DATE _____

ACCOUNTING PERIOD _____

BUDGET FY _____

Document Number	Action	Fund	Agency	Organi- zation	Activity	Reporting Category	Object	Current Amount	Revised Amount	Change Increase (Decrease)	Sub- Total	Description
		156	010	1360			5100			13,424		Increase Permanent
		156	010	1360			5500			(3,890)		Decrease Fringe
		156	010	1360			5550			(943)		Decrease Insurance
											8,591	Total Personnel
		156	010	1360			6110			900		Increase Professional Svcs.
		156	010	1360			6120			900		Increase Printing
		156	010	1360			6200			450		Increase Postage
		156	010	1360			6230			250		Increase Supplies
		156	010	1360			6270			350		Increase Food
		156	010	1360			6310			1,900		Increase Ed. & Train.
		156	010	1360			6330			2,331		Increase Local Travel
		156	010	1360			7100			1,849		Increase Indirect (.069).
		156	010	1360			7150			1,124		Increase Telephone
		156	010	1360			7400			10,000		Increase Bldg. Mgmt.
											20,054	Total M&S
		156	010	1360			8400			13,664		Capital Outlay
											13,664	Total Capital Outlay
											42,309	TOTAL ORGANIZATION
		100	010	0104			7608			1,849	1,849	Cash Transfer
		165	040	7990			6140			1,124	1,124	Telephone Fund
		400	040	7531			6520			(943)	(943)	Insurance
		100	030	5600			6180			10,000	10,000	Bldg. Mgmt.
////////////////////////////////////												
TOTAL EXPENDITURE CHANGE										54,339		TOTAL EXPENDITURE CHANGE

REVENUE

TRANSACTION RB []

GM []

TRANSACTION DATE _____

ACCOUNTING PERIOD _____

BUDGET FY _____

Document Number	Action	Fund	Agency	Organization	Reporting Activity Category	Revenue Source	Current Amount	Revised Amount	Change Increase (Decrease)	Sub- Total	Description
		156	010	1360		2782			(10,813)		Parkrose School
		156	010	1360		2766			(1,334)		PPS
		156	010	1360		2783			13,387		Gresham High
		156	010	1360		2785			14,872		Gordon Russell
		156	010	1360		2786			251		Dexter McCarty
		156	010	1360		2791			24,097		Centennial School
										40,460	Subtotal
		156	010	1360		7601			1,849		Cash Transfer from GF
		100	045	7410		6602			1,849		Svc. Reimb. F/S to CGF
		165	040	7990		6602			1,124		Svc. Reimb. F/S to Teleph.
		400	040	7531		6602			(943)		Svc. Reimb. F/S to Insur.
		100	030	5600		6602			10,000		Svc. Reimb. F/S to Bldg. Mgmt.
////////////////////////////////////											
TOTAL REVENUE CHANGE									54,339	TOTAL REVENUE CHANGE	

[9110S-m/4]



MULTNOMAH COUNTY OREGON

DEPARTMENT OF HUMAN SERVICES
SOCIAL AND FAMILY SERVICES DIVISION
ADMINISTRATIVE OFFICES
426 S.W. STARK ST., 6TH FLOOR
PORTLAND, OREGON 97204
(503) 248-3691

BOARD OF COUNTY COMMISSIONERS
GLADYS McCOY • CHAIR OF THE BOARD
PAULINE ANDERSON • DISTRICT 1 COMMISSIONER
GRETCHEN KAFOURY • DISTRICT 2 COMMISSIONER
RICK BAUMAN • DISTRICT 3 COMMISSIONER
SHARRON KELLEY • DISTRICT 4 COMMISSIONER

MEMORANDUM

TO: Gladys McCoy
Multnomah County Chair

VIA: Duane Zussy *Duane Zussy (m)*
Director, Department of Human Services

FROM: Gary Smith *GS/Soc*
Director, Social Services Division

DATE: December 7, 1989

SUBJECT: Recommendation to Approve Budget Increase and Adjustments in MED
Children's Services Program

RECOMMENDATION: The Social Services Division recommends Board approval of Budget Modification DHS # 26.

ANALYSIS: This Bud Mod adjusts revenues to reflect actual contract totals with various school districts, for a net increase of \$40,460. At the same time, we are adjusting various line items to reflect personnel changes and actual expenditure levels. Two School Mental Health Consultants are added to meet the new contract requirements.

BACKGROUND: Since school contracts are for the period of the school year, September to June, we can only estimate our future budgets in a general way. This year, we added Centennial School District. We also experienced many staff changes and turnover and Employee Services approved reclassifications for two positions to meet the needs of a much larger program, due to budget decisions last Spring and increased contracts this Fall. Finally, space, equipment, and M&S increases reflect both the staff increases and an anticipated move to the Mead Building.

[4433B]

BUDGET MODIFICATION NO. DJS #12(For Clerk's Use) Meeting Date 12/21/89
Agenda No. R-221. REQUEST FOR PLACEMENT ON THE AGENDA FOR December 21, 1989
(Date)DEPARTMENT District AttorneyCONTACT Kelly Bacon

DIVISION

TELEPHONE 248-3105*NAME(s) OF PERSON MAKING PRESENTATION TO BOARD Kelly Bacon**SUGGESTED****AGENDA TITLE** (to assist in preparing a description for the printed agenda)

Budget Modification DJS #12 requests to appropriate \$117,562 of ROCN Anti-Drug Grant and \$39,188 of Equitable Sharing Funds to the District Attorney's Office to apprehend and prosecute drug offenders.

(Estimated Time Needed on the Agenda)

2. DESCRIPTION OF MODIFICATION (Explain the changes this Bud Mod makes. What budget does it increase? What do the changes accomplish? Where does the money come from? What budget is reduced? Attach additional information if you need more space.)

☒ PERSONNEL CHANGES ARE SHOWN IN DETAIL ON THE ATTACHED SHEET

Budget Modification DJS #12 appropriates funds to continue the District Attorney's involvement in the Multi-jurisdictional task force - ROCN. This effort is funded by the ROCN Anti Drug Grant \$117,562 and by Equitable Sharing \$39,188. It funds a Deputy DA, an Office Assistant and an intergovernmental agreement with the City of Portland for a Police Captain and related Materials & Services and Capital for this FY. The Anti-Drug Grant is for a total of \$172,064 for the period of 10/1/89 - 09/30/90 and was made available under the Anti-Drug Abuse Act. The Equitable Sharing funds serve as the required local match of 25 percent.

original sent 12/20/89

CLERK OF
COUNTY COMMISSIONERS
1989 DEC 12 AM 10:15
MULTNOMAH COUNTY
OREGON

3. REVENUE IMPACT (Explain revenues being changed and the reason for the change)

Increases ROCN Anti Drug Grant \$117,562

Decreases General Fund by \$ 3,323

Increases Service reimbursement F/S Fund to Insurance Fund by \$5,544

Increases Service reimbursement F/S Fund to General Fund by \$3,893

4. CONTINGENCY STATUS (to be completed by Finance/Budget)

Contingency before this modification (as of _____) \$ _____
(Specify Fund) (Date)

After this modification \$ _____

Originated By

Date

Department Manager

Date

Budget Analyst

Date

Personnel Analyst

Date

Board Approval

Date

EXPENDITURE
TRANSACTION EB []

GM []

TRANSACTION DATE _____

ACCOUNTING PERIOD _____

BUDGET FY _____

Document Number	Action	Fund	Agency	Organi- zation	Activity	Reporting Category	Object	Current Amount	Revised Amount	Change Increase (Decrease)	Sub- Total	Description
		156	020	2471			5100			48,145		Personnel
		156	020	2471			5500			12,161		Fringe
		156	020	2471			5550			5,544	65,850	Insurance
		156	020	2471			6060			63,684		Pass Through
		156	020	2471			6110			14,000		Professional Services
		156	020	2471			7100			7,216		Indirect
		156	020	2471			8400			6,000		Equipment
		156	020	2446			6100			(39,188)		Prof. Svcs - Equip Share
		156	020	2446			7100			(3,323)		Indirect
		400	040	7531			6580			5,544		Insurance
		100	045	9120			7700			7,216		G.F. Contingency
		100	020	2405			7608			(3,323)		C.T. to F/S Fund

//////
TOTAL EXPENDITURE CHANGE//////123,676TOTAL EXPENDITURE CHANGE

REVENUE

TRANSACTION RB []

GM []

TRANSACTION DATE _____

ACCOUNTING PERIOD _____

BUDGET FY _____

Document Number	Action	Fund	Agency	Organi- zation	Activity	Reporting Category	Revenue Source	Current Amount	Revised Amount	Change Increase (Decrease)	Sub- Total	Description
		156	020	2471			*requested			117,562		New Grant Revenue
		400	040	7531			6602			5,544		Svc Reimb. F/S to Ins Fur
		100	045	9120			7700			3,893		Svc Reimb. F/S to GF
		156	020	2471			2014			39,188		Equitable Sharing
		156	020	2471			2014			(39,188)		Equitable Sharing
		156	020	2446			7601			(3,323)		General Fund

//////
TOTAL REVENUE CHANGE//////123,676TOTAL REVENUE CHANGE

PERSONNEL DETAIL FOR BUD MOD NO. DS#12

5. ANNUALIZED PERSONNEL CHANGES (Compute on a full year basis even though this action affects only a part of the fiscal year.)

FTE Increase (Decrease)	POSITION TITLE	Annualized			
		BASE PAY Increase (Decrease)	Increase (Decrease) Fringe	Ins.	TOTAL Increase (Decrease)
1	DDA 3	46,203	11,671	4,119	61,993
1	OA 2	17,991	4,544	3,273	25,808
	TOTAL CHANGE (ANNUALIZED)	64,194	16,215	7,392	87,801

6. CURRENT YEAR PERSONNEL DOLLAR CHANGES (calculate costs or savings that will take place within this fiscal year; these should explain the actual dollar amounts being changed by this Bud Mod.)

Permanent Positions, Temporary, Overtime, or Premium	Explanation of Change	Current FY			
		BASE PAY Increase (Decrease)	Increase (Decrease) Fringe	Ins.	TOTAL Increase (Decrease)
1 for 9 mos.	DDA 3	34,652	8,753	3,089	46,494
1 for 9 mos.	OA 2	13,493	3,408	2,455	19,356
	TOTAL FOR 89/90 FY	48,145	12,161	5,544	65,850



MULTNOMAH COUNTY OREGON

DHS 98-2 FY90

CONTRACT APPROVAL FORM

(See instructions on reverse side)

TYPE I

- ☐ Professional Services under \$10,000
☐ Revenue
☐ Grant Funding
☒ Intergovernmental Agreement

Amendment # 2 to Contract # 100980

TYPE II

- ☐ Professional Services over \$10,000 (RFP, Exemption)
☐ PCRB Contract
☐ Maintenance Agreement
☐ Licensing Agreement
☐ Construction

Amendment # _____ to Contract # _____

Contact Person Susan Clark Phone 248-3691 Date 12/20/89Department Human Services Division Social Services Bldg/Room 160/6Description of Contract Work Activity Center funding is increased \$2,776 to transfer one slot from Portland Habilitation Center. Funding in DD program budget.RFP/BID # N/A - IGA Date of RFP/BID _____ Exemption Exp. Date _____ORS/AR # _____ Contractor is ☐ MBE ☐ FBE ☐ QRFContractor Name OHSU-CDRCMailing Address 3181 Sam Jackson Park Road L-106
Portland, OR 97201Phone 225-8634Employer ID# or SS# 93-6001786Effective Date December 1, 1989Termination Date June 30, 1990Original Contract Amount \$ 133,019.52Amount of Amendment \$ 2,776.06Total Amount of Agreement \$ 135,795.58

Required Signatures:

Department Head _____

Date _____

Purchasing Director _____
(Type II Contracts Only)

Date _____

County Counsel _____

Date _____

Budget Office _____

Date _____

County Executive/Sheriff _____

Date _____

 BOARD OF
 COUNTY COMMISSIONERS
 1990 FEB 21 PM 4:04
 MULTNOMAH COUNTY
 OREGON

TRANSACTION CODE	P O	AGENCY	PO DATE	ACCOUNTING PERIOD	BUDGET FY	ACTION				
VENDOR CODE		VENDOR NAME			TOTAL AMOUNT	\$				
LINE NO.	CONTRACT NUMBER	FUND	AGENCY	ORGANIZATION	ACTIVITY OBJECT	SUB OBJ	REPT CATEG	DESCRIPTION	AMOUNT	INC/DEC IND
		156	010	1250	DD40 6060		1240		\$ 2,776.06	
									\$	
									\$	
									\$	

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

GOLDENROD - BUDGET

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **TYPE I, TYPE II** — Check off appropriate type of contract in one of the two boxes on top of form. Note: Type II contracts need to be routed through Purchasing Director, Type I does not. If Amendment, enter contract number of original agreement and original contract amount.
2. **CONTACT PERSON, PHONE** — Enter name and phone number of person initiating contract from responsible County department.
3. **DATE** — Enter date contract and Contract Approval Form submitted for approval and execution.
4. **DEPARTMENT, DIVISION, BLDG/ROOM** — List appropriate County department and division responsible and interoffice mail code.
5. **DESCRIPTION OF CONTRACT** — Summary of product purchased or services to be performed. Note if an amendment or extension.
6. **RFD/BID #** — Enter number if contract is result of RFP/Bid selection process.
7. **DATE OF RFP/BID** — Enter date of RFP/BID public opening.
8. **DATE OF EXEMPTION** — Enter date exemption from competitive bidding granted by BCC.
9. **REVIEWED FOR MINORITY/FEMALE BUSINESS** — Check appropriate box if County sought business from MBE or FBE firm(s).
10. **CONTRACTOR IS MBE OR FBE** — Check appropriate box if contractor is certified as an MBE or FBE.
11. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** — Enter current information.
12. **EMPLOYER ID# OR SS#** — Enter employer ID# or social security number if Contractor is individual.
13. **EFFECTIVE DATE** — Date contract states to begin services.
14. **TERMINATION DATE** — Date contract states services terminated.
15. **TOTAL AMOUNT OF AGREEMENT** — Enter amount of agreement being submitted. If Amendment, enter amount of increase/decrease only.
16. **PAYMENT TERMS** — Designate payment terms by checking appropriate box and entering dollar amount.
17. **REQUIREMENTS CONTRACT — REQUISITION REQUIRED** — Check this box to note that a Purchase Order will be issued to trigger payment.
18. **PURCHASE ORDER NO.** — Enter number of Purchase Order to be issued. If number is not known, enter "P.O. will be issued."
19. **REQUIRED SIGNATURES** — To be completed as approved. Purchasing Director needs to sign for Type II contracts only.
20. **AGENCY** — Enter your Department's agency number.
21. **VENDOR NAME** — Enter Contractor name as entered above.
22. **TOTAL AMOUNT** — Enter total dollar amount of contract.
23. **CONTRACT NUMBER** — Purchasing will enter all new contract numbers. If contract extension or amendment, initiator should enter current contract number.
24. **ACCOUNT CODE STRUCTURE** — Enter Account Code structure for the type of agreement, i.e., expense or revenue.
25. **DESCRIPTION** — Optional.
26. **AMOUNT** — If total dollar amount is being split among different account numbers indicate dollar amounts here.

**CONTRACT APPROVAL FORM**

(See Administrative Procedure #2106)

MULTNOMAH COUNTY OREGON

Contract # 100930Amendment # 16

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement

Contact Person Susan Clark Phone 248-3691 Date 1/25/90
 Department Human Services Division Social Services Bldg/Room 160/6
 Description of Contract Amendment #16 increases and decreases funding in the MED program area; and increases funding in the DD program area.

RFP/BID # N/A - Revenue Date of RFP/BID _____ Exemption Exp. Date _____
 ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name State Mental Health Division
 Mailing Address 2575 Bittern Street NE
Salem, OR 97310
 Phone 373-7827
 Employer ID # or SS # N/A - Revenue
 Effective Date July 1, 1989
 Termination Date June 30, 1990
 Original Contract Amount \$ 26,644,508.
 Amount of Amendment \$ 62,285.
 Total Amount of Agreement \$ 26,706,793

Payment Term

- ☐ Lump Sum \$ _____
☒ Monthly \$ Allotment
☐ Other \$ _____
☐ Requirements contract - Requisition required.
 Purchase Order No. _____
☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:Department Manager Duane Zussy (w)Date 1/30/90Purchasing Director
(Class II Contracts Only)

Date _____

County Counsel

Date 1.31.90

County Chair/Sheriff

Date 2-2-90

VENDOR CODE				VENDOR NAME					TOTAL AMOUNT		\$	
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT		INC/ DEC IND
01.	156	010	1305						Revenue 2605	33,604.		
02.	156	010	1215						"	28,681.		
03.												

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/BID** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT** - Requisition Required - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
23. **LGFS DESCRIPTION** - Abbreviated description for Data Entry purposes.
24. **AMOUNT** - If total dollar amount is being split among different account numbers, indicate dollar amounts here.



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM

(See instructions on reverse side)

PHS # 93-12

TYPE I

- ☐ Professional Services under \$10,000
☐ Revenue
☐ Grant Funding
☒ Intergovernmental Agreement

Amendment # 12 to Contract # 100930-12

TYPE II

- ☐ Professional Services over \$10,000 (RFP, Exemption)
☐ PCRB Contract
☐ Maintenance Agreement
☐ Licensing Agreement
☐ Construction

Amendment # _____ to Contract # _____

Contact Person Susan Clark Phone 248-3691 Date 12-6-89Department Human Services Division Social Services Bldg/Room 160/6Description of Contract Amendment #12 increases revenues in the MED, DD and DD program areas for additional services.RFP/BID # N/A Date of RFP/BID _____ Exemption Exp. Date _____ORS/AR # _____ Contractor is ☐ MBE ☐ FBE ☐ QREContractor Name State Mental Health DivisionMailing Address 2575 Bittern Street NESalem, OR 97310Phone 373-7827Employer ID# or SS# N/A - RevenueEffective Date July 1, 1989Termination Date June 30, 1990Original Contract Amount \$ 26,639,267Amount of Amendment \$ 198,817Total Amount of Agreement \$ 26,838,084

Required Signatures:

Department Head [Signature] Date 1/30/90Purchasing Director _____ Date _____
(Type II Contracts Only)

County Counsel _____ Date _____

Budget Office _____ Date _____

County Executive/Sheriff _____ Date _____

TRANSACTION CODE	P O	AGENCY	PO DATE	ACCOUNTING PERIOD	BUDGET FY	ACTION					
VENDOR CODE	VENDOR NAME	TOTAL AMOUNT									
9V17856		\$									
LINE NO.	CONTRACT NUMBER	FUND	AGENCY	ORGANIZATION	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	DESCRIPTION	AMOUNT	INC/DEC IND
	10013012	156	010	1305					Revenue 2605	\$ 105,642.	
		156	010	1215					" "	\$ 53,267.	
		156	010	1270					" "	\$ 34,731.	
		156	010	1415					" "	\$ 5,177.	

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

GOLDENROD - BUDGET

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **TYPE I, TYPE II** — Check off appropriate type of contract in one of the two boxes on top of form. Note: Type II contracts need to be routed through Purchasing Director, Type I does not. If Amendment, enter contract number of original agreement and original contract amount.
2. **CONTACT PERSON, PHONE** — Enter name and phone number of person initiating contract from responsible County department.
3. **DATE** — Enter date contract and Contract Approval Form submitted for approval and execution.
4. **DEPARTMENT, DIVISION, BLDG/ROOM** — List appropriate County department and division responsible and interoffice mail code.
5. **DESCRIPTION OF CONTRACT** — Summary of product purchased or services to be performed. Note if an amendment or extension.
6. **RFD/BID #** — Enter number if contract is result of RFP/Bid selection process.
7. **DATE OF RFP/BID** — Enter date of RFP/BID public opening.
8. **DATE OF EXEMPTION** — Enter date exemption from competitive bidding granted by BCC.
9. **REVIEWED FOR MINORITY/FEMALE BUSINESS** — Check appropriate box if County sought business from MBE or FBE firm(s).
10. **CONTRACTOR IS MBE OR FBE** — Check appropriate box if contractor is certified as an MBE or FBE.
11. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** — Enter current information.
12. **EMPLOYER ID# OR SS#** — Enter employer ID# or social security number if Contractor is individual.
13. **EFFECTIVE DATE** — Date contract states to begin services.
14. **TERMINATION DATE** — Date contract states services terminated.
15. **TOTAL AMOUNT OF AGREEMENT** — Enter amount of agreement being submitted. If Amendment, enter amount of increase/decrease only.
16. **PAYMENT TERMS** — Designate payment terms by checking appropriate box and entering dollar amount.
17. **REQUIREMENTS CONTRACT — REQUISITION REQUIRED** — Check this box to note that a Purchase Order will be issued to trigger payment.
18. **PURCHASE ORDER NO.** — Enter number of Purchase Order to be issued. If number is not known, enter "P.O. will be issued."
19. **REQUIRED SIGNATURES** — To be completed as approved. Purchasing Director needs to sign for Type II contracts only.
20. **AGENCY** — Enter your Department's agency number.
21. **VENDOR NAME** — Enter Contractor name as entered above.
22. **TOTAL AMOUNT** — Enter total dollar amount of contract.
23. **CONTRACT NUMBER** — Purchasing will enter all new contract numbers. If contract extension or amendment, initiator should enter current contract number.
24. **ACCOUNT CODE STRUCTURE** — Enter Account Code structure for the type of agreement, i.e., expense or revenue.
25. **DESCRIPTION** — Optional.
26. **AMOUNT** — If total dollar amount is being split among different account numbers indicate dollar amounts here.



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM

(See instructions on reverse side)

DHS #102-1

FY 89-90

TYPE I

- ☐ Professional Services under \$10,000
☐ Revenue
☐ Grant Funding
☒ Intergovernmental Agreement

Amendment # 1 to Contract # 101020

TYPE II

- ☐ Professional Services over \$10,000 (RFP, Exemption)
☐ PCRB Contract
☐ Maintenance Agreement
☐ Licensing Agreement
☐ Construction

Amendment # _____ to Contract # _____

Contact Person Susan Clark Phone 248-3691 Date 11/15/89Department Human Services Division Social Services Bldg/Room 160/6

Description of Contract Revision of Employment Transportation Special Conditions allowing payment for rides for Multnomah County residents only, as authorized by the Vocational Program Development Specialist. Payment made monthly upon submission of billing.

RFP/BID # Exempt-IGA Date of RFP/BID _____ Exemption Exp. Date _____ORS/AR # _____ Contractor is ☐ MBE ☐ FBE ☐ QRF

Contractor Name Tri-Met
 Mailing Address 4012 SE 17th Ave.
Portland, OR 97202
 Phone 238-4879
 Employer ID# or SS# 93-0579353
 Effective Date July 1, 1989
 Termination Date June 30, 1990
 Original Contract Amount \$ Requirements
 Amount of Amendment \$ _____
 Total Amount of Agreement \$ Requirements

Payment Terms

- ☐ Lump Sum \$ _____
☐ Monthly \$ _____
☒ Other \$ Fee for services.
☐ Requirements contract-requisition required
 Purchase Order No. _____

Required Signatures:

80 Department Head [Signature] (M)Date 11/21/89Purchasing Director _____
(Type II Contracts Only)

Date _____

County Counsel _____

Date _____

Budget Office _____

Date _____

County Executive/Sheriff _____

Date _____

TRANSACTION CODE	P.O.	AGENCY	PO DATE	ACCOUNTING PERIOD	BUDGET FY	ACTION					
VENDOR CODE		VENDOR NAME			TOTAL AMOUNT	\$					
LINE NO.	CONTRACT NUMBER	FUND	AGENCY	ORGANIZATION	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	DESCRIPTION	AMOUNT	INC/DEC IND
	101020-1	156	010	1246	DD53	6060		1253		\$ Requirements.	
										\$	
										\$	
										\$	
										\$	

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **TYPE I, TYPE II** — Check off appropriate type of contract in one of the two boxes on top of form. Note: Type II contracts need to be routed through Purchasing Director, Type I does not. If Amendment, enter contract number of original agreement and original contract amount.
2. **CONTACT PERSON, PHONE** — Enter name and phone number of person initiating contract from responsible County department.
3. **DATE** — Enter date contract and Contract Approval Form submitted for approval and execution.
4. **DEPARTMENT, DIVISION, BLDG/ROOM** — List appropriate County department and division responsible and interoffice mail code.
5. **DESCRIPTION OF CONTRACT** — Summary of product purchased or services to be performed. Note if an amendment or extension.
6. **RFD/BID #** — Enter number if contract is result of RFP/Bid selection process.
7. **DATE OF RFP/BID** — Enter date of RFP/BID public opening.
8. **DATE OF EXEMPTION** — Enter date exemption from competitive bidding granted by BCC.
9. **REVIEWED FOR MINORITY/FEMALE BUSINESS** — Check appropriate box if County sought business from MBE or FBE firm(s).
10. **CONTRACTOR IS MBE OR FBE** — Check appropriate box if contractor is certified as an MBE or FBE.
11. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** — Enter current information.
12. **EMPLOYER ID# OR SS#** — Enter employer ID# or social security number if Contractor is individual.
13. **EFFECTIVE DATE** — Date contract states to begin services.
14. **TERMINATION DATE** — Date contract states services terminated.
15. **TOTAL AMOUNT OF AGREEMENT** — Enter amount of agreement being submitted. If Amendment, enter amount of increase/decrease only.
16. **PAYMENT TERMS** — Designate payment terms by checking appropriate box and entering dollar amount.
17. **REQUIREMENTS CONTRACT — REQUISITION REQUIRED** — Check this box to note that a Purchase Order will be issued to trigger payment.
18. **PURCHASE ORDER NO.** — Enter number of Purchase Order to be issued. If number is not known, enter "P.O. will be issued."
19. **REQUIRED SIGNATURES** — To be completed as approved. Purchasing Director needs to sign for Type II contracts only.
20. **AGENCY** — Enter your Department's agency number.
21. **VENDOR NAME** — Enter Contractor name as entered above.
22. **TOTAL AMOUNT** — Enter total dollar amount of contract.
23. **CONTRACT NUMBER** — Purchasing will enter all new contract numbers. If contract extension or amendment, initiator should enter current contract number.
24. **ACCOUNT CODE STRUCTURE** — Enter Account Code structure for the type of agreement, i.e., expense or revenue.
25. **DESCRIPTION** — Optional.
26. **AMOUNT** — If total dollar amount is being split among different account numbers indicate dollar amounts here.

**CONTRACT APPROVAL FORM**

(See Administrative Procedure #2106)

MULTNOMAH COUNTY OREGON

Contract # 30147-0

Amendment # _____

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement

Contact Person F. Wayne George/Jim Emerson Phone 248-3322 Date _____
Department Environmental Services Division Facilities Mgmt. Bldg/Room 421/3rd
Description of Contract Preparation of a Storm Drain master Plan of the North Troutdale drainage basin. This master plan includes County Property which will benefit from the study.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____
ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name City of Troutdale
Mailing Address 104 SE Kibling
Troutdale, OR. 97060
Phone 665-5175
Employer ID # or SS # _____
Effective Date _____
Termination Date _____
Original Contract Amount \$ _____
Amount of Amendment \$ _____
Total Amount of Agreement \$ 13,335.00

Payment Term

- ☐ Lump Sum \$ _____
☐ Monthly \$ _____
☐ Other \$ _____
☐ Requirements contract - Requisition required.
Purchase Order No. _____
☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager [Signature]
Purchasing Director _____
(Class II Contracts Only)
County Counsel [Signature]
County Chair/Sheriff [Signature]

Date 1-9-90
Date _____
Date 1-14-90
Date 1-22-90

VENDOR CODE				VENDOR NAME					TOTAL AMOUNT \$		
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	100	030	5610			6110					
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/BID** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT** - Requisition Required - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
23. **LGFS DESCRIPTION** - Abbreviated description for Data Entry purposes.
24. **AMOUNT** - If total dollar amount is being split among different account numbers, indicate dollar amounts here.

NUMBER 30147-0

CITY OF TROUTDALE
INTERGOVERNMENTAL AGREEMENT

THIS AGREEMENT made and entered into as of the ____ day of November, 1989, between the CITY OF TROUTDALE, a home rule political subdivision of the State of Oregon, herein after referred to as the "Contractor" and MULTNOMAH COUNTY, hereinafter referred to as the "County."

WITNESSETH

WHEREAS, the City of Troutdale is preparing a Drainage Master Plan that affects and benefits the County under terms and conditions described herein and attached hereto; and

WHEREAS, the Contractor and County are jointly, but not equally participating, in the planning, design, and preparation of a Storm Drain Master Plan; and

WHEREAS, the Contractor is able and prepared to provide such services as would benefit the County under the terms and conditions set forth; now therefore,

IN CONSIDERATION of those mutual promises and the terms and conditions set forth hereinafter, the parties agree as follows:

ARTICLE I

CONTRACTOR SERVICES AND CONDITIONS

- A. The services of the Contractor shall specifically include the preparation of a Storm Drain Master Plan of the North Troutdale Drainage Basin. This master plan includes County property which will benefit from the study.
- B. The Contractor will be allowed to sub-contract this project to an engineer approved by the Troutdale City Council. This contract/agreement is attached and made part of this intergovernmental agreement.
- C. The Contractor will form a technical advisory committee consisting of one representative each from the following jurisdictions: City of Troutdale, Multnomah County, Sandy Drainage District, Port of Portland and the City of Wood Village.

- D. The recommendations of the Storm Drain Master Plan will not obligate the County, until approved by the Troutdale City Council, to any identified capital improvement projects.
- E. Four copies of the Draft Master Plan will be presented to the County for final review and input. In addition, once the project is completed, eight "final" documents will be submitted to Multnomah County for their records.
- F. This project will be completed in total and all documents released as indicated in "E" above no later than June 30, 1990.

ARTICLE II

COUNTY OBLIGATIONS AND TERMS

- A. Total amount of the engineering contract is estimated to be \$58,300. The total amount of ground surveying costs is estimated to be \$5,200.
 - 1. The County agrees to pay the Contractor an amount equal to \$13,335.00 for the services described above, herein and attached hereto and payment shall be made as periodically invoiced by the Contractor during the work progress.
 - 2. No additional compensation will be claimed by the Contractor for in kind services, long distance communications, travel, materials or supplies, etc.

ARTICLE III

WORK IS PROPERTY OF CONTRACTOR

All work performed by the Contractor under this Agreement shall be the property of the Contractor. However, Contractor will provide documents as identified in Article I, Subsection "E" and/or additional documents at the County's request for cost equivalent to reproduction charges associated thereto.

ARTICLE IV

GENERAL PROVISIONS

- A. Access to Records:

The County, through its duly authorized representatives, shall have access during normal business hours to such

books, documents, papers and records of the Contractor as is directly pertinent to this Agreement for the purpose of making audit examination, excerpts and transcripts.

B. Contractor is Independent Contractor:

1. Contractor's services shall be provided under the general supervision of the City of Troutdale Director of Public Works, but Contractor shall be an independent contractor for all purposes and shall be entitled to no compensation other than the compensation provided for under Article II of this Agreement unless both parties so agree in writing.
2. Contractor hereby certifies that it is either a Direct Responsibility Employer as provided in ORS 656.407 (1979) or a Contributing Employer as provided in ORS 656.411 (1979).
3. The Contractor acknowledges responsibility for liability arising out of Contractor's performance under this Agreement and shall hold the County harmless from and indemnify County for any and all liability, settlements, loss, judgments, costs, attorneys' fees, or expenses in connection with any action, suit or claim resulting or allegedly resulting from activities or services provided pursuant to this Agreement.
4. County acknowledges responsibility for liability arising out of the County's performance under this Agreement and shall hold the Contractor harmless from and indemnify the Contractor for any and all liability, settlements, loss, judgments, costs, attorneys' fees, or expenses in connection with any action, suit or claim resulting or allegedly resulting from activities or services provided pursuant to this Agreement.

C. Early Termination:

1. This Agreement may be terminated prior to the expiration of the agreed upon term:
 - a. By mutual consent of the parties; or
 - b. By either party upon 30 days' notice to the other, delivered by certified mail or in person, under any of the following circumstances:
 - (1) In the event funding from federal, state or other sources is not obtained and

continued at levels sufficient for payment as provided herein. If possible and upon agreement of the parties, this agreement may be modified to accommodate reduced available funding, but shall in no case be reduced below the level of existing or obligated costs incurred at the time of termination or reduced scope.

(2) If federal or state regulations or guidelines are modified or changed in a manner which prohibits or renders inappropriate the purchase of such services as are provided hereunder.

(3) If any license or certificate required by law or regulation to be held by the Contractor, or his designee, to provide the services required by this Agreement is for any reason denied, revoked or not renewed.

2. Payment to Contractor shall be prorated to and include the day of termination and shall be in full satisfaction of all claims by Contractor against County under this Agreement.
3. Termination under any provision of Article IV-C shall not affect any right, obligation or liability of Contractor or County which accrued prior to such termination.
4. County, by written notice of default (including breach of agreement) to the Contractor, may terminate the whole or any part of this Agreement:
 - a. If Contractor fails to provide services prescribed herein within the time specified or any extension thereof; or
 - b. If Contractor fails to perform any of the other provisions of the agreement in accordance with its terms, and after receipt of written notice from County, Contractor fails to correct such failures within 10 days or such other period as the County may authorize.

D. Subcontracts and Assignment:

Contractor shall have full right to subcontract with others for any of the work prescribed herein, and may assign any of Contractor's rights acquired hereunder without prior approval from County; County by this

Agreement incurs no liability to third persons for payment of any compensation provided herein to Contractor except as defined Contractor payments specified in this Agreement.

E. Adherence to Law:

1. Contractor shall adhere to all applicable laws governing its relationship with its employees, including but not limited to laws, rules, regulations and policies concerning workers' compensation, and minimum and prevailing wage requirements.

F. Modification:

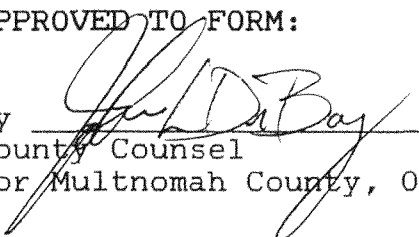
Any modification of the provisions of this Agreement shall be reduced to writing and signed by the parties.

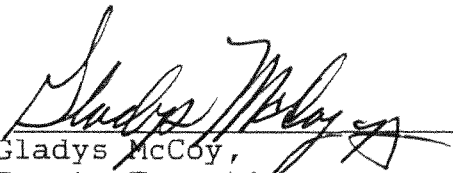
G. Integration:

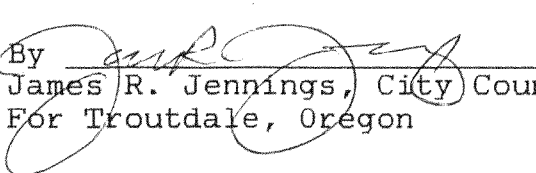
This Agreement contains the entire agreement between the parties and supersedes all prior written or oral discussions or agreements.

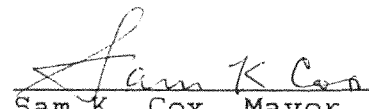
IN WITNESS WHEREOF, the parties have caused this Agreement to be executed by their duly appointed officers the date first written above.

APPROVED TO FORM:

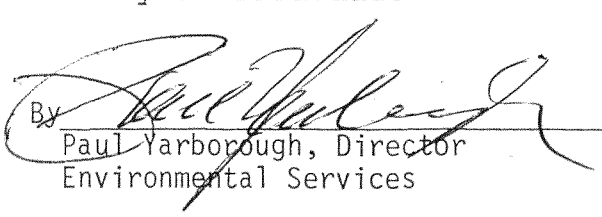
By 
County Counsel
For Multnomah County, Oregon

By 
Gladys McCoy,
County Executive

By 
James R. Jennings, City Counsel
For Troutdale, Oregon

By 
Sam K. Cox, Mayor
City of Troutdale

PW79:2

By 
Paul Yarborough, Director
Environmental Services



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM

(See instructions on reverse side)

DH# 100-1

FY 89-90

TYPE I

- ☐ Professional Services under \$10,000
☐ Revenue
☐ Grant Funding
☐ Intergovernmental Agreement

TYPE II

- ☐ Professional Services over \$10,000 (RFP, Exemption)
☐ PCRB Contract
☐ Maintenance Agreement
☐ Licensing Agreement
☐ Construction

Change Order Amendment # 1 to Contract # 101000

Amendment # to Contract #

Contact Person Susan Clark Phone 248-3691 Date 11/8/89

Department Human Services Division Social Services Bldg/Room 160/6

Description of Contract Increases Early Intervention funding due to an increase in funding from the State Mental Health Division. Revenue identified in State Amendment # 4.

RFP/BID # Exempt-IGA Date of RFP/BID Exemption Exp. Date

ORS/AR # Contractor is ☐ MBE ☐ FBE ☐ QRF

Contractor Name Portland Public Schools

Mailing Address 531 SE 14th
Portland, OR 97214

Phone 289-5840

Employer ID# or SS# 93-6000830

Effective Date Sept. 1, 1989

Termination Date June 30, 1990

Original Contract Amount \$ 568,360.00

Amount of Amendment \$ 143,040.00

Total Amount of Agreement \$ 711,400.00

Payment Terms

- ☐ Lump Sum \$
☒ Monthly \$ Allotment
☐ Other \$

☐ Requirements contract-requisition required
 Purchase Order No.

Required Signatures:

Department Head Date 11/15/89

Purchasing Director (Type II Contracts Only) Date 11/17/89

County Counsel Date 11/21/89

Budget Office Date 11/27/89

County Executive/Sheriff Date 11/27/89

TRANSACTION CODE	P.O.	AGENCY	PO DATE	ACCOUNTING PERIOD	BUDGET FY	ACTION				
VENDOR CODE	VENDOR NAME				TOTAL AMOUNT	\$				
LINE NO.	CONTRACT NUMBER	FUND	AGENCY	ORGANIZATION	ACTIVITY OBJECT	SUB OBJ	REPT CATEG	DESCRIPTION	AMOUNT	INC/DEC IND
	101000-1	156	010	1240	DD55	6060	1255		\$ 143,040.00	
									\$	
									\$	
									\$	
									\$	

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **TYPE I, TYPE II** — Check off appropriate type of contract in one of the two boxes on top of form. Note: Type II contracts need to be routed through Purchasing Director, Type I does not. If Amendment, enter contract number of original agreement and original contract amount.
2. **CONTACT PERSON, PHONE** — Enter name and phone number of person initiating contract from responsible County department.
3. **DATE** — Enter date contract and Contract Approval Form submitted for approval and execution.
4. **DEPARTMENT, DIVISION, BLDG/ROOM** — List appropriate County department and division responsible and interoffice mail code.
5. **DESCRIPTION OF CONTRACT** — Summary of product purchased or services to be performed. Note if an amendment or extension.
6. **RFD/BID #** — Enter number if contract is result of RFP/Bid selection process.
7. **DATE OF RFP/BID** — Enter date of RFP/BID public opening.
8. **DATE OF EXEMPTION** — Enter date exemption from competitive bidding granted by BCC.
9. **REVIEWED FOR MINORITY/FEMALE BUSINESS** — Check appropriate box if County sought business from MBE or FBE firm(s).
10. **CONTRACTOR IS MBE OR FBE** — Check appropriate box if contractor is certified as an MBE or FBE.
11. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** — Enter current information.
12. **EMPLOYER ID# OR SS#** — Enter employer ID# or social security number if Contractor is individual.
13. **EFFECTIVE DATE** — Date contract states to begin services.
14. **TERMINATION DATE** — Date contract states services terminated.
15. **TOTAL AMOUNT OF AGREEMENT** — Enter amount of agreement being submitted. If Amendment, enter amount of increase/decrease only.
16. **PAYMENT TERMS** — Designate payment terms by checking appropriate box and entering dollar amount.
17. **REQUIREMENTS CONTRACT — REQUISITION REQUIRED** — Check this box to note that a Purchase Order will be issued to trigger payment.
18. **PURCHASE ORDER NO.** — Enter number of Purchase Order to be issued. If number is not known, enter "P.O. will be issued."
19. **REQUIRED SIGNATURES** — To be completed as approved. Purchasing Director needs to sign for Type II contracts only.
20. **AGENCY** — Enter your Department's agency number.
21. **VENDOR NAME** — Enter Contractor name as entered above.
22. **TOTAL AMOUNT** — Enter total dollar amount of contract.
23. **CONTRACT NUMBER** — Purchasing will enter all new contract numbers. If contract extension or amendment, initiator should enter current contract number.
24. **ACCOUNT CODE STRUCTURE** — Enter Account Code structure for the type of agreement, i.e., expense or revenue.
25. **DESCRIPTION** — Optional.
26. **AMOUNT** — If total dollar amount is being split among different account numbers indicate dollar amounts here.



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

DHS # 93-14

MULTNOMAH COUNTY OREGON

Contract # 100930-14
Amendment # 14

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement

Contact Person Susan Clark Phone 3691 Date 12/27/89
 Department Human Services Division Social Services Bldg/Room 160/6
 Description of Contract Amendment #14 decreases revenue in the DD program area. Bud Mod DHS
adjusts the appropriation to reflect this amendment.

RFP/BID # N/A - Revenue Date of RFP/BID _____ Exemption Exp. Date _____
 ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name State Mental Health Division
 Mailing Address 2575 Bittern Street NE
Salem, OR 97310
 Phone 373-7827
 Employer ID # or SS # N/A - Revenue
 Effective Date July 1, 1989
 Termination Date June 30, 1990
 Original Contract Amount \$ 26,823,182
 Amount of Amendment \$ (9,019)
 Total Amount of Agreement \$ 26,814,163

Payment Term
☐ Lump Sum \$ _____
☒ Monthly \$ Allotment
☐ Other \$ _____
☐ Requirements contract - Requisition required.
 Purchase Order No. _____
☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager [Signature]
 Purchasing Director _____
 (Class II Contracts Only)
 County Counsel [Signature]
 County Chair/Sheriff [Signature]

Date 11/19/90
 Date _____
 Date 1-19-90
 Date 1-24-90

VENDOR CODE <u>GV7856</u>				VENDOR NAME					TOTAL AMOUNT \$		
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	156	010	12 70		DD48				Rev. Source 2605	(9,019)	
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING CANARY - INITIATOR PINK - CLERK OF THE BOARD GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/BID** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT - Requisition Required** - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
23. **LGFS DESCRIPTION** - Abbreviated description for Data Entry purposes.
24. **AMOUNT** - If total dollar amount is being split among different account numbers, indicate dollar amounts here.



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM
(See instructions on reverse side)

DHS# 55

FY89-90

TYPE I

- ☒ Professional Services under \$10,000
☐ Revenue
☐ Grant Funding
☐ Intergovernmental Agreement

Amendment # _____ to Contract # _____

TYPE II

- ☐ Professional Services over \$10,000 (RFP, Exemption)
☐ PCRB Contract
☐ Maintenance Agreement
☐ Licensing Agreement
☐ Construction

Amendment # _____ to Contract # _____

Contact Person Susan Clark Phone 3691 Date 5-15-89Department Human Services Division Social Services Bldg/Room 160/6Description of Contract Renewal of Annual Contract for Developmental Disabilities
Services as identified in 89 - 90 Budget.RFP/BID # Exempt - less than \$10,000 Date of RFP/BID _____ Exemption Exp. Date _____ORS/AR # _____ Contractor is ☐ MBE ☐ FBE ☐ QRF

Contractor Name Radio Cab Company
Mailing Address 1613 N. W. Kearney
Portland, OR 97209
Phone (503) 226-7319
Employer ID# or SS# 93-0344396
Effective Date 7-1-89
Termination Date 6-30-90
Original Contract Amount \$ 8,500.00
Amount of Amendment \$ _____
Total Amount of Agreement \$ 8,500.00

Payment Terms

- ☐ Lump Sum \$ _____
☐ Monthly \$ _____
☒ Other \$ Fee for Service

☐ Requirements contract-requisition required
Purchase Order No. _____

Required Signatures:

Department Head Diane Hussy (PO)Date 5/24/89Purchasing Director John M. Walker
(Type II Contracts-Only)Date 6/5/89County Counsel Amanda BrownDate 5/25/89Budget Office Thomas Brown JFDate 5/30/89

County Executive/Sheriff _____

Date _____

TRANSACTION CODE	P.O.	AGENCY	PO DATE	m m d d y y	ACCOUNTING PERIOD	m m y y	BUDGET FY	y y	ACTION	
VENDOR CODE		VENDOR NAME			TOTAL AMOUNT		\$			
NE O.	CONTRACT NUMBER	FUND	AGENCY	ORGANIZATION	ACTIVITY OBJECT	SUB OBJ	REPT CATEG	DESCRIPTION	AMOUNT	INC/ DEC IND
	100550	156	010	1242	DD53 6060		1253		8,500.00	
									\$	
									\$	
									\$	

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

GOLDENROD - BUDGET

CHANGE ORDER

PROJECT: Multnomah County Health Clinic
3653 S.E. 34th Ave.

CHANGE ORDER NUMBER: 4

TO: Silco Construction
8614 N. Crawford Street
P.O. Box 03310
Portland, OR 97203-0310

CONTRACT NUMBER: 300900

OWNER'S PROJECT NO.: C903

CONTRACT FOR: General Construction

CONTRACT DATE: 09-15-89

RECEIVED

JAN 8 1990

SILCO CONST. CO.

You are directed to make the following changes in this Contract:

C.O. 4.1 Silco Proposal Request Letter dated 12-06-89	Revise elect-switches/lights Proposal Request #29	Add \$ 804.00
C.O. 4.2 Silco Proposal Request Letter dated 12-06-89	Provide catch basins Proposal Request #26	Add \$ 885.00
C.O. 4.3 Silco Proposal Request Letter dated 12-06-89	Delete light fixture Proposal Request #19	Deduct \$ 142.00
C.O. 4.4 Silco Proposal Request Letter dated 12-06-89	Revise light locations/switch Proposal Request #30	Add \$ 74.00

TOTAL Add 1621.00 BH

The original Contract Sum was	\$1,694,026.00
Net changes by previous Change Orders	\$ 15,906.00
The Contract Sum prior to this Change Order was	\$1,709,932.00
The Contract Sum will be increased	\$ 1,905.00 1621.00
The new Contract Sum including this Change Order will be	\$1,711,837.00
The Contract Time will be unchanged	1,711,553.00 BH

Lennie Sobocinski
PROJECT MANAGER

Silco Construction
CONTRACTOR
8614 N. Crawford Street
ADDRESS
Portland, OR 97203

Multnomah County
OWNER
2505 S.E. 11th Avenue
ADDRESS
Portland, OR 97202

BY *[Signature]*
DATE 1/22/90

F. Wayne George
FACILITIES MANAGEMENT DIR.
BY *[Signature]*
DATE 1/19/90

BY *[Signature]*
DATE 1/8/90

Lillie M. Walker
PURCHASING DIRECTOR
BY *[Signature]*
DATE 1/23/90

LS:CLS
122889

99 FEB -5 AM 10:55
MULTNOMAH COUNTY
OREGON

CHANGE ORDER

RECEIVED
JAN 12 1990

SILCO CONST. CO.

PROJECT: Multnomah County Health Clinic 3653 S.E. 34th Ave.
TO: Silco Construction
8614 N. Crawford Street
P.O. Box 03310
Portland, OR 97203-0310

CHANGE ORDER NUMBER: 5
CONTRACT NUMBER: 300900
OWNER'S PROJECT NO.: C903
CONTRACT FOR: General Construction
CONTRACT DATE: 09-15-89

You are directed to make the following changes in this Contract:

C.O. 5.1 Silco Proposal Request Letter dated 12-06-89	Delete Sump Pump Proposal Request #35 <i>#25 BRL</i>	Deduct \$ 27.00 <i>22.00 BRL</i>
C.O. 5.2 Silco Proposal Request Letter dated 01-02-90	Provide conduit ground wire to phone room Proposal Request #44	Add \$ 126.00
C.O. 5.3 Silco Proposal Request Letter dated 01-02-90	Provide connection for AC-1 Proposal Request #45	Add \$ 541.00
C.O. 5.4 Silco Proposal Request Letter dated 01-02-90	Revise circuits to battery inverter Proposal Request #46	Add \$ 100.00
C.O. 5.5 Silco Proposal Request Letter dated 01-03-90	Add terminal boards/duplex outlets Proposal Request #48	Add \$ 189.00
C.O. 5.6 Silco Proposal Request Letter dated 12-20-89	Add for elect. permit	Add \$ 359.00
C.O. 5.7 Silco Design Clarification E-9 Letter dated 12-6-89	Add Home Run for CRT Counter	Add \$ 259.00
C.O. 5.8 Silco Proposal Request Letter dated 12-07-89	Installation and removal of MDP	Add \$3,890.00

1990 FEB 3 11 15 AM
MULTNOMAH COUNTY
CLERK

C.O. 5.9 Silco Proposal Request Letter Dated 01-02-90	Add conduit for telecommunication Add \$2,638.00
C.O.5.10 Silco Proposal Request Letter Dated 12-06-89	Add back 2 switches include change order #4 Add \$ 68.00
C.O.5.11 Silco Letter Dated 10-05-89	Provide 6" layer of 1½" minus rock Add \$ 725.00
C.O.5.12 Sign Revision Letter dated 01-08-90	Add for signage Add \$ 89.00
TOTAL ADD \$8,962.00	

The original Contract Sum was	\$1,694,026.00
Net changes by previous Change Orders	\$ 17,527.00
The Contract Sum prior to this Change Order was	\$1,711,553.00
The Contract Sum will be increased	\$ 8,962.00
The new Contract Sum including this Change Order will be	\$1,720,515.00
The Contract Time will be unchanged	

Lennie Sobocinski
PROJECT MANAGER

BY

DATE

F. Wayne George
FACILITIES MANAGEMENT DIR.

BY

DATE

Silco Construction

CONTRACTOR

8614 N. Crawford Street

ADDRESS

Portland, OR 97203

BY

DATE

Multnomah County

OWNER

2505 S.E. 11th Avenue

ADDRESS

Portland, OR 97202

Lillie M. Walker

PURCHASING DIRECTOR

BY

DATE

LS:CLS
011190



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM

(See instructions on reverse side)

TYPE I

- ☒ Professional Services under \$10,000
☐ Revenue
☐ Grant Funding
☐ Intergovernmental Agreement

Amendment to above, Number _____

(Original Contract Amount _____)

TYPE II

- ☐ Professional Services over \$10,000 (RFP, Exemption)
☐ PCRB Contract
☐ Maintenance Agreement
☐ Licensing Agreement

Amendment to above, Number _____

(Original Contract Amount _____)

Contact Person John R. Papp Phone 3525 Date 2/14/90Department Land Department Division Urban Rev. Committee Bldg/Room 100/1500Description of Contract Professional Services under \$10,000

RFP/BID # _____ Date of RFP/BID _____ Date of Exemption _____

Reviewed For ☐ MBE ☐ FBE ParticipationContractor is ☐ MBE ☐ FBEContractor Name John R. PappMailing Address 1000 15th St NWPhone 226-1151Employer ID# or SS# 13-239-4748Effective Date 1/15/90Termination Date 1/15/90Total Amount of Agreement \$ 3,000.00

FUND	AGENCY	ORGANIZATION	ACTIVITY	OBJ	SUB OBJ	REV SOURCE	SUB REV	REPT CATEG

Payment Terms

- ☐ Lump Sum \$ _____
☐ Monthly \$ _____
☒ Other \$ 42,510.00

☐ Requirements contract-requisition required
 Purchase Order No. _____

Required Signatures:

Department Head [Signature]Date 2/15/90Purchasing Director _____
(Type II Contracts Only)

Date _____

County Counsel _____

Date 2/1/90

Budget Office _____

Date _____

County Executive/Sheriff _____

Date _____

code

FOR ACCOUNTING/PURCHASING USE ONLY

VENDOR
name

YEAR

AUTHORIZATION NOTICE

ENCUMBRANCE
"APRON" ONLY

ACCT NO.	NUMBER	FUND	AGENCY	ORGANIZATION	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	DESCRIPTION	AMOUNT	INC/ DEC IND

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

GOLDENROD - BUDGET

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **TYPE I, TYPE II** — Check off appropriate type of contract in one of the two boxes on top of form. Note: Type II contracts need to be routed through Purchasing Director, Type I does not. If Amendment, enter contract number of original agreement and original contract amount.
2. **CONTACT PERSON, PHONE** — Enter name and phone number of person initiating contract from responsible County department.
3. **DATE** — Enter date contract and Contract Approval Form submitted for approval and execution.
4. **DEPARTMENT, DIVISION, BLDG/ROOM** — List appropriate County department and division responsible and interoffice mail code.
5. **DESCRIPTION OF CONTRACT** — Summary of product purchased or services to be performed. Note if an amendment or extension.
6. **RFP/BID #** — Enter number if contract is result of RFP/Bid selection process.
7. **DATE OF RFP/BID** — Enter date of RFP/BID public opening.
8. **DATE OF EXEMPTION** — Enter date exemption from competitive bidding granted by BCC.
9. **REVIEWED FOR MINORITY/FEMALE BUSINESS** — Check appropriate box if County sought business from MBE or FBE firm(s).
10. **CONTRACTOR IS MBE OR FBE** — Check appropriate box if contractor is certified as an MBE or FBE.
11. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** — Enter current information.
12. **EMPLOYER ID# OR SS#** — Enter employer ID# or social security number if Contractor is an individual.
13. **EFFECTIVE DATE** — Date contract states to begin services.
14. **TERMINATION DATE** — Date contract states services terminated.
15. **TOTAL AMOUNT OF AGREEMENT** — Enter amount of agreement being submitted. If Amendment, enter amount of increase/decrease only.
16. **PAYMENT TERMS** — Designate payment terms by checking appropriate box and entering dollar amount.
17. **REQUIREMENTS CONTRACT — REQUISITION REQUIRED** — Check this box to note that a Purchase Order will be issued to trigger payment.
18. **PURCHASE ORDER NO.** — Enter number of Purchase Order to be issued. If number is not known, enter "P.O. will be issued."
19. **ACCOUNT CODE STRUCTURE** — Enter Account Code structure for the type of agreement, i.e., expense or revenue.
20. **REQUIRED SIGNATURES** — To be completed as approved. Purchasing Director needs to sign for Type II contracts only.
21. **AUTHORIZATION NOTICE** — For Accounting/Purchasing Use Only



MULTNOMAH COUNTY OREGON

CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

DHS 93-11

Contract # 100920-11R
Amendment # 11R

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input checked="" type="checkbox"/> Intergovernmental Agreement

Contact Person Susan Clark Phone 3691 Date 12/27/89
 Department Human Services Division Social Svcs. Bldg/Room 160/6
 Description of Contract Amendment #11R increases revenues in the DD program area for increased services. Bud Mod DHS # 37 appropriates revenue.

RFP/BID # N/A - Revenue Date of RFP/BID _____ Exemption Exp. Date _____
 ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name State Mental Health Division
 Mailing Address 2575 Bittern Street NE
Salem, OR 97310
 Phone 373-7827
 Employer ID # or SS # N/A - Revenue
 Effective Date July 1, 1989
 Termination Date June 30, 1990
 Original Contract Amount \$ 26,639,267
 Amount of Amendment \$ 46,242
 Total Amount of Agreement \$ 26,685,509

Payment Term

- ☐ Lump Sum \$ _____
☒ Monthly \$ Allotment
☐ Other \$ _____
☐ Requirements contract - Requisition required.
 Purchase Order No. _____
☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

KH Department Manager [Signature]
 Purchasing Director
 (Class II Contracts Only) [Signature]
 County Counsel [Signature]
 County Chair/Sheriff [Signature]

Date 12/28/89
 Date _____
 Date 1-18-90
 Date 1-22-90

VENDOR CODE				VENDOR NAME					TOTAL AMOUNT \$		
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	INC/ DEC IND
01.	156	010	1210						Rev. Source 2605	849	
02.	156	010	1215						"	44,127	
03.	156	010	1270						"	1,265	

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/BID** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT - Requisition Required** - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
23. **LGFS DESCRIPTION** - Abbreviated description for Data Entry purposes.
24. **AMOUNT** - If total dollar amount is being split among different account numbers, indicate dollar amounts here.



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

MULTNOMAH COUNTY OREGON

Contract # xxx 300250

Amendment # 2

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input checked="" type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input type="checkbox"/> Intergovernmental Agreement

Contact Person Janet Hawkins/H.C.Tupper Phone 248-3707 Date 11-29-89

Department Environmental Services Division Community Dev. Bldg/Room 412/201

Description of Contract This Addendum provides for allocation of Emergency Shelter Grant program funds held by the Red Cross Clearinghouse to be disbursed for operational support and renovation/repair assistance for the Northwest Housing Alternatives Transitional Housing Shelter

RFP/BID # Dept. RFP Date of RFP/BID CDBG Application Process 3-17-89 Exemption Exp. Date _____

ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name Trail Chpt/ American Red Cross

Mailing Address 3131 N. Vancouver
Portland, Oregon 97208

Phone (503) 284-1234

Employer ID # or SS # 93-0386784

Effective Date December 1, 1989

Termination Date June 30, 1990

Original Contract Amount \$ 56,000.00

Amount of Amendment \$ 26,000.00

Total Amount of Agreement \$ 82,000.00

Payment Term

- ☐ Lump Sum \$ _____
- ☐ Monthly \$ _____
- ☐ Other \$ _____
- ☐ Requirements contract - Requisition required.
- Purchase Order No. _____
- ☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager [Signature] Date 11-30-89

Purchasing Director [Signature] Date 2/6/90
(Class II Contracts Only)

County Counsel [Signature] Date 1/18/90

County Chair/Sheriff [Signature] Date 2/20/90

VENDOR CODE				VENDOR NAME					TOTAL AMOUNT		\$	
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT		INC/ DEC IND
01.	156	030	5458			6060			Housing Voucher	42,000.00		
02.			5459						Administration	14,000.00		
03.			5430						Emergency Shelter	26,000.00		
									Grant Program	82,000.00	TOTAL	

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/BID** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT** - Requisition Required - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
23. **LGFS DESCRIPTION** - Abbreviated description for Data Entry purposes.
24. **AMOUNT** - If total dollar amount is being split among different account numbers, indicate dollar amounts here.



CONTRACT APPROVAL FORM

(See Administrative Procedure #2106)

MULTNOMAH COUNTY OREGON

Contract # 301350
Amendment # _____

CLASS I	CLASS II	CLASS III
<input type="checkbox"/> Professional Services under \$10,000	<input type="checkbox"/> Professional Services over \$10,000 (RFP, Exemption) <input type="checkbox"/> PCRB Contract <input type="checkbox"/> Maintenance Agreement <input type="checkbox"/> Licensing Agreement <input checked="" type="checkbox"/> Construction <input type="checkbox"/> Grant <input type="checkbox"/> Revenue	<input type="checkbox"/> Intergovernmental Agreement

Contact Person H.C. Tupper Phone 248-3114 Date 11/29/89
Department Environmental Services Division Community Development Bldg/Room 412/237
Description of Contract Agreement provides for repair and renovation assistance to Northwest Housing Alternatives, Inc. for the Division Street Homeless Shelter using Emergency Shelter Grant Funds.

RFP/BID # _____ Date of RFP/BID _____ Exemption Exp. Date _____
ORS/AR # _____ Contractor is ☐ MBE ☐ WBE ☐ QRF

Contractor Name Northwest Housing Alternatives, Inc.
Mailing Address 2316 S.E. Willard Street
Milwaukie, Oregon 97222

Phone (503) 654-1007
Employer ID # or SS # 93-0814473
Effective Date Dec. 1, 1989
Termination Date Dec. 1, 1989
Original Contract Amount \$ 14,000.
Amount of Amendment \$ -0-
Total Amount of Agreement \$ 14,000.

Payment Term
☐ Lump Sum \$ _____
☐ Monthly \$ _____
☒ Other \$1000 Request
☐ Requirements contract - Requisition required.
Purchase Order No. _____
☐ Requirements Not to Exceed \$ _____

REQUIRED SIGNATURES:

Department Manager [Signature]
Purchasing Director [Signature]
(Class II Contracts Only)
County Counsel [Signature]
County Chair/Sheriff [Signature]

Date 11-30-89
Date 2/6/90
Date 1/18/90
Date 2-20-90

VENDOR CODE				VENDOR NAME					TOTAL AMOUNT		INC/DEC IND
LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	OBJECT	SUB OBJ	REPT CATEG	LGFS DESCRIPTION	AMOUNT	
01.	156	030	5430		6060				Emergency Shelter Grant Program	14,000.	
02.											
03.											

INSTRUCTIONS ON REVERSE SIDE

WHITE - PURCHASING

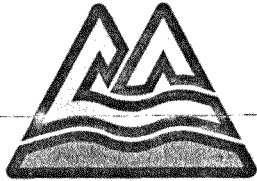
CANARY - INITIATOR

PINK - CLERK OF THE BOARD

GREEN - FINANCE

INSTRUCTIONS FOR COMPLETING CONTRACT APPROVAL FORM

1. **CLASS I, CLASS II, CLASS III** - Check off appropriate class of contract in one of the three columns on the top of the form.
2. **CONTRACT #** - To be issued by designated person in each Division or call Purchasing to get a number.
3. **AMENDMENT #** - Sequential numbering to original contract as changes are made and approved.
4. **DESCRIPTION OF CONTRACT** - Summary of product purchased or services to be performed. Note if an amendment or extension.
5. **RFP/BID #** - Enter number if contract is a result of RFP/Bid selection process.
6. **DATE RFP/BID** - Enter date of RFP/Bid public opening.
7. **EXEMPTION EXPIRATION DATE** - Enter exemption expiration date from competitive bidding granted by BCC or the Chair.
8. **ORS/AR#** - Refer to Oregon Revised Statutes and/or Administrative Rule #, when applicable.
9. **CONTRACTOR IS MBE, WBE, QRF** - Check appropriate box if contractor is certified as an MBE, WBE, or QRF (Qualified Rehabilitation Facility).
10. **CONTRACTOR NAME, MAILING ADDRESS, PHONE** - Enter current information.
11. **EMPLOYEE ID# OR SS#** - Enter employee federal ID# or Social Security # if contractor is an individual.
12. **EFFECTIVE DATE** - Date stated on contract to begin services.
13. **TERMINATION DATE** - Date stated on contract to terminate services.
14. **ORIGINAL CONTRACT AMOUNT** - Enter amount of original contract.
15. **AMOUNT OF AMENDMENT** - Enter amendment or change order amount only, if applicable.
16. **TOTAL AMOUNT OF AGREEMENT** - Enter original amount of contract. If this is an amendment or change order, please include original amount and amended amount.
17. **PAYMENT TERMS** - Designate payment terms by checking appropriate box and entering dollar amount.
18. **REQUIREMENTS CONTRACT - Requisition Required** - Check this box to note that a purchase order will be issued to initiate payment.
19. **PURCHASE ORDER #** - Enter number of purchase order to be issued. If number is not known, enter "PO will be issued."
20. **REQUIREMENTS NOT TO EXCEED** - List the estimated dollar amount of requirements contracts.
21. **REQUIRED SIGNATURES** - To be completed as approved. Purchasing Director needs to sign all Class II contracts only.
22. **ACCOUNT CODE STRUCTURE** - Enter account code structure for the type of agreement; i.e., expense or revenue.
23. **LGFS DESCRIPTION** - Abbreviated description for Data Entry purposes.
24. **AMOUNT** - If total dollar amount is being split among different account numbers, indicate dollar amounts here.



MULTNOMAH COUNTY OREGON

BOARD OF COUNTY COMMISSIONERS
ROOM 605, COUNTY COURTHOUSE
1021 S.W. FOURTH AVENUE
PORTLAND, OREGON 97204

GLADYS McCOY • CHAIR • 248-3308
PAULINE ANDERSON • DISTRICT 1 • 248-5220
GRETCHEN KAFOURY • DISTRICT 2 • 248-5219
RICK BAUMAN • DISTRICT 3 • 248-5217
SHARRON KELLEY • DISTRICT 4 • 248-5213
JANE McGARVIN • Clerk • 248-3277

AGENDA OF
MEETINGS OF THE MULTNOMAH COUNTY BOARD OF COMMISSIONERS
FOR THE WEEK OF
October 30 - November 3, 1989

Tuesday, October 31, 1989 - 9:30 AM - Planning Items . . . Page 2
Tuesday, October 31, 1989 - 1:30 PM - Informal Meeting . . Page 2
Thursday, November 2, 1989 - 9:30 AM - Formal. Page 3
Work Session - . . Page 4
Justice Services

Tuesday, October 31, 1989 - 9:30 AM

Multnomah County Courthouse, Room 602

Continued Hearing - In the matter of Reviewing the Decision of the Planning Commission of July 10, 1989, Case CS 7-89, denying community service designation to allow development of a Tri-Met Terminus facility, for property located at 13525 SE Foster Road

On the Record plus Additional Testimony and Evidence Related to Traffic Impact. Notice of Review filed by the applicant. Oral Arguments - 20 minutes per side. Case was first heard by the Board on September 5 and continued to this date.

Tuesday, October 31, 1989 - 1:30 PM

Multnomah County Courthouse, Room 602

INFORMAL

1. Update concerning the Community Integration Project Phase II, status and request for Board direction on future involvement - Duane Zussy, Gary Smith, and DD Program Staff
2. Presentation of the Design Study report for the 207th Connector which is a County planned transportation piece linking the County arterial system with State improvements on I-84. Also, a status report per request for comment from the Board on State planned improvements to I-84 east of 181st - Susie Lahsene, Scott Pemble
3. Presentation on the Supplemental Security Outreach Program being co-sponsord by the PMCoA and the American Association of Retired Persons, to promote awareness about the federally funded SSI Program and to enroll eligible elderly and disabled citizens - Marian Sarles, Ruth Currie
4. Informal Review of Formal Agenda of November 2

PUBLIC TESTIMONY WILL NOT BE TAKEN AT INFORMAL MEETINGS

Thursday, November 2, 1989, 9:30 AM

Multnomah County Courthouse, Room 602

Formal Agenda

CONSENT CALENDAR

DEPARTMENT OF JUSTICE SERVICES

- C-1 Liquor License applications submitted by Sheriff's Office with recommendation that same be approved as follows:
Package Store, Change of Ownership: Bob's Corner Grocery & Deli, 13110 S.E. Division; Biff's Seafood, 12840 S.E. Stark
- C-2 In the Matter of Approval of transfer of found, unclaimed property (List 89-2) from Sheriff's Office to the Department of General Services for sale or disposal as provided by Multnomah County Code 7.70
- C-3 In the Matter of Approval of transfer of found, unclaimed weapons (List 89-3) for Sheriff's Office to the Department of General Services for disposal as provided by Multnomah County Code 7.70
- C-4 In the Matter of Approval of transfer of found, unclaimed money (List 89-4), totaling \$4,202.81, from Sheriff's Office to the General Fund as provided by Multnomah County Code 7.70
- C-5 In the Matter of Approval of transfer of found, unclaimed bicycles (List 89-5) from Sheriff's Office to the Department of General Services for sale or disposal as provided by Multnomah County Code 7.70

REGULAR AGENDA

NONDEPARTMENTAL

- R-6 Resolution In the Matter of Acceptance of the Report "In Search of Ombudsmen" from the Portland/Multnomah Commission on Aging (P/MCoA) Ombudsman Committee

DEPARTMENT OF ENVIRONMENTAL SERVICES

- R-7 In the Matter of Ratification of an Intergovernmental Agreement with the City of Gresham to share costs of replacing the present one signal head at the intersection of N.E. Halsey St. and N.E. 192nd Avenue with two signals per approach

- R-8 Resolution In the Matter of Surrendering Jurisdiction to the City of Portland of all county roads in the areas annexed to the city between January 1, 1989, and June 30, 1989 (sets 12/12/89 as date for Hearing)
- R-9 Order In the Matter of Establishment of N.E. 179th Avenue from E. Burnside Street, northerly to N.E. Couch Street as a county road to be known as N.E. 179th Avenue, No. 4871
- R-10 Order In the Matter of Establishment of N.E. Couch Street from N.E. 179th Avenue, westerly 92.27 feet as a county road to be known as N.E. Couch Street, No. 4872

DEPARTMENT OF HUMAN SERVICES

- R-11 In the Matter of Ratification of an Intergovernmental Agreement with Multnomah County Education Service District to provide programming, printing, and staff support to train and assist County Health Division to comply with State law concerning mandatory immunizations of children entering all public and private schools in Multnomah County
- R-12 Budget Modification DHS #20 making an appropriation transfer in the amount of \$215,361 from General Fund Contingency to Aging Services, Federal/State Fund, to replace previously anticipated revenue from the City of Portland for the Portland/Multnomah Commission on Aging
- R-13 Budget Modification DHS #21 requests approval for several housekeeping changes to the Health Division Budget, General and Federal State Funds, with a net increase of \$46,651
- R-14 In the Matter of Ratification of Revision #1 to the Intergovernmental Revenue Agreement with Oregon Health Division whereby the amendment makes various additions/deletions to the 23 public health programs funded by the State effective for the period of July 1, 1989 through June 30, 1990

WORK SESSION

(following Formal Meeting)

1. Justice Services Issues

Thursday Meetings of the Multnomah County Board of Commissioners are recorded and can be seen at the following times:

Thursday, 10:00 PM, Channel 11 for East and West side subscribers

Friday, 6:00 PM, Channel 27 for Rogers Multnomah East subscribers

Saturday 12:00 PM, Channel 21 for East Portland and East County subscribers