

# MULTNOMAH COUNTY CONTRACT APPROVAL FORM

**Check all that apply**

<input checked="" type="checkbox"/> County Attorney email approval attached	Contract Number: <u>0607003</u>
<input type="checkbox"/> Retro Memo attached	Amendment Number: <u>5</u>
<input type="checkbox"/> Proof of insurance attached	Vendor Number: _____
<input type="checkbox"/> EEO Exhibit 5 attached (contracts over \$75,000)	Date: <u>04/25/11</u>
<input type="checkbox"/> Expenditure <input checked="" type="checkbox"/> Revenue <input type="checkbox"/> Non-Financial Agreement <input type="checkbox"/> Inter-Departmental	

**CAF Purpose**

New Contract     Renewal     Date Change     Funding Change     Service Change

Department: <u>Sheriff's Office</u>	Division/Program: <u>Enforcement/Patrol</u>
Originator: <u>Chief Deputy Jason Gates</u>	Phone: <u>503-255-3600</u> Mail Stop: <u>313</u>
Contact: <u>Brad Lynch</u>	Phone: <u>503-988-4336</u> Mail Stop: <u>503/350</u>

**Contract/Amendment Procurement Details**

Procurement No.(s): _____	Effective Date: _____	End Date: _____
Exemption or Citation No.(s): <u>46-0430(1)(f)</u>	Effective Date: _____	End Date: _____
Check all that apply to contractor: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> ESB <input type="checkbox"/> QRF State Cert No.: _____ <input type="checkbox"/> Non-Profit <input type="checkbox"/> N/A		

Contractor: <u>USDA, Forest Service</u> Address: <u>16400 Champion Way</u> City/State/Zip: <u>Sandy, OR 97055</u> Telephone: <u>503-668-1789</u>	Payment Schedule/Terms: <input type="checkbox"/> Lump Sum    \$ _____ <input type="checkbox"/> Due on Receipt <input type="checkbox"/> Monthly    \$ _____ <input type="checkbox"/> Net 30 <input type="checkbox"/> Quarterly    \$ _____ <input type="checkbox"/> Other <input type="checkbox"/> Other    \$ _____
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Contract Effect Date: <u>06/01/06</u>	Term Date: <u>02/28/11</u>	
Amend Effect Date: <u>03/01/11</u>	New Term Date: <u>02/28/12</u>	<input type="checkbox"/> Price Agreement or Requirements Funding Information:
Original Contract Amount: \$ <u>30,000.00</u>	Original PA/Requirements Amt: \$ _____	
Total Amount Previous Amend: \$ <u>135,750.00</u>	Total Amount Previous Amend: \$ _____	
Amount of Amendment: \$ <u>34,500.00</u>	Requirements Amount Amend: \$ _____	
Total Amount of Agreement: \$ <u>200,250.00</u>	Total Amount of PA/Requirements: \$ _____	

**Required Signatures**

Dept Director or Designee: \_\_\_\_\_ Date: \_\_\_\_\_

County Chair: \_\_\_\_\_ Date: \_\_\_\_\_

**Vendor Contact Information**

**Changed from Previous CAF**

Name: <u>Maria J. Grevstad</u>	Title: <u>Administrative Assistant</u>	email: <u>mgrevstad@fs.fed.us</u>
Name: _____	Title: _____	email: _____
Name: _____	Title: _____	email: _____

**Contract/Amendment Description Or Comments**

Amendment to extend the term of an intergovernmental agreement for patrol services of Forest Service lands.