

MULTNOMAH COUNTY CONTRACT APPROVAL FORM

Check all that apply

<input checked="" type="checkbox"/> County Attorney email approval attached	Contract Number: 0607003
<input type="checkbox"/> Retro Memo attached	Amendment Number: 5
<input type="checkbox"/> Proof of insurance attached	Vendor Number: _____
<input type="checkbox"/> EEO Exhibit 5 attached (contracts over \$75,000)	Date: 04/25/11
<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: Sheriff's Office	Division/Program: Enforcement/Patrol
Originator: Chief Deputy Jason Gates	Phone: 503-255-3600 Mail Stop: 313
Contact: Brad Lynch	Phone: 503-988-4336 Mail Stop: 503/350

Contract/Amendment Procurement Details

Procurement No.(s): _____	Effective Date: _____	End Date: _____
Exemption or Citation No.(s): 46-0430(1)(f)	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: USDA, Forest Service	Payment Schedule/Terms:
Address: 16400 Champion Way	<input type="checkbox"/> Lump Sum \$ _____ <input type="checkbox"/> Due on Receipt
City/State/Zip: Sandy, OR 97055	<input type="checkbox"/> Monthly \$ _____ <input type="checkbox"/> Net 30
Telephone: 503-668-1789	<input type="checkbox"/> Quarterly \$ _____ <input type="checkbox"/> Other
	<input type="checkbox"/> Other \$ _____

Contract Effect Date: 06/01/06	Term Date: 02/28/11	<input type="checkbox"/> Price Agreement or Requirements Funding Information:
Amend Effect Date: 03/01/11	New Term Date: 02/28/12	
Original Contract Amount: \$ 30,000.00	Original PA/Requirements Amt: \$ _____	
Total Amount Previous Amend: \$ 135,750.00	Total Amount Previous Amend: \$ _____	
Amount of Amendment: \$ 34,500.00	Requirements Amount Amend: \$ _____	
Total Amount of Agreement: \$ 200,250.00	Total Amount of PA/Requirements: \$ _____	

Required Signatures

Dept Director or Designee: _____ Date: _____
 County Chair: _____ Date: _____

Vendor Contact Information

☐ Changed from Previous CAF

Name: Maria J. Grevstad	Title: Administrative Assistant	email: mgrevstad@fs.fed.us
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.