

## MULTNOMAH COUNTY CONTRACT APPROVAL FORM (CAF)

Contract #: 0607002

Pre-approved Contract Boilerplate (with County Attorney signature)  Attached  Not Attached

Amendment #: 4

CLASS I Based on Informal / Intermediate Procurement	CLASS II Based on Formal Procurement	CLASS III Intergovernmental Contract (IGA)
<input type="checkbox"/> Personal Services Contract	<input type="checkbox"/> Personal Services Contract	<input type="checkbox"/> Expenditure Contract
PCRB Contract <input type="checkbox"/> Goods or Services <input type="checkbox"/> Maintenance or Licensing Agreement <input type="checkbox"/> Public Works / Construction Contract <input type="checkbox"/> Architectural & Engineering Contract	PCRB Contract <input type="checkbox"/> Goods or Services <input type="checkbox"/> Maintenance or Licensing Agreement <input type="checkbox"/> Public Works / Construction Contract <input type="checkbox"/> Architectural & Engineering Contract	<input checked="" type="checkbox"/> Revenue Contract <input type="checkbox"/> Grant Contract <input type="checkbox"/> Non-Financial Agreement
<input type="checkbox"/> Revenue Contract <input type="checkbox"/> Grant Contract <input type="checkbox"/> Non-Financial Agreement	<input type="checkbox"/> Revenue Contract <input type="checkbox"/> Grant Contract <input type="checkbox"/> Non-Financial Agreement	<input type="checkbox"/> <b>INTER-DEPARTMENTAL AGREEMENT (IDA)</b>

Department: Sheriff's Office Division/Program: Enforcement Date: 03/29/10  
 Originator: Captain Jason Gates Phone: 503-255-3633 Bldg/Room: 313  
 Contact: Brad Lynch Phone: 503-988-4336 Bldg/Room: 503/350

Description of Contract: Amendment to extend the term and set the contract amount for fiscal year 2011 law enforcement services.

RENEWAL:  PREVIOUS CONTRACT #(S) 0405123, 0310511, 0210308 EEO Exhibit 5 required if amount over \$75k  
 PROCUREMENT EXEMPTION OR CITATION # 46-0130(f)(1) ISSUE DATE: \_\_\_\_\_ EFFECTIVE DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_  
 CONTRACTOR IS:  MBE  WBE  ESB  QRF State Cert# \_\_\_\_\_ or  Self Cert  Non-Profit  N/A (Check all boxes that apply)

Contractor	City of Maywood Park		Remittance address (If different)		
Address	10100 NE Prescott Street, Suite 147		Payment Schedule / Terms:		
City/State	Maywood Park, Oregon		<input type="checkbox"/> Lump Sum \$ _____	<input type="checkbox"/> Due on Receipt	
ZIP Code	97220		<input type="checkbox"/> Monthly \$ _____	<input type="checkbox"/> Net 30	
Phone	503-255-9805		<input type="checkbox"/> Other \$ _____	<input type="checkbox"/> Other	
Contract Effective Date	<u>07/01/06</u>	Term Date	<u>06/30/10</u>	<input type="checkbox"/> Price Agreement (PA) or Requirements Funding Info:	
Amendment Effect Date	<u>07/01/10</u>	New Term Date	<u>06/30/11</u>		
Original Contract Amount	\$ 27,252.16	Original PA/Requirements Amount	\$ _____		
Total Amt of Previous Amendments	\$ 87,707.80	Total Amt of Previous Amendments	\$ _____		
Amount of Amendment	\$ 31,274.00	Amount of Amendment	\$ _____		
Total Amount of Agreement \$	\$ 146,233.96	Total PA/Requirements Amount	\$ _____		

**REQUIRED SIGNATURES:**

Department Manager \_\_\_\_\_ DATE \_\_\_\_\_  
 County Attorney \_\_\_\_\_ DATE \_\_\_\_\_  
 CPCA Manager \_\_\_\_\_ DATE \_\_\_\_\_  
 County Chair \_\_\_\_\_ DATE \_\_\_\_\_  
 Sheriff \_\_\_\_\_ DATE \_\_\_\_\_  
 Contract Administration \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS:

