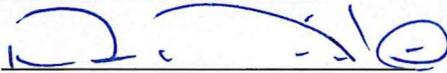


CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 11/30/2021

Need Date: 12/16/2021

PROCESSING DEPARTMENT:

Department: Probation
Dept. Contact: Jackie Cook
Phone: x5588
Department
Head Signature: 

CONTRACTOR:

Name: SCRAM of California
Address: 402 W. Broadway, Suite 400
San Diego CA 92101
Phone: 925-597-0340
Org Code: 2500000
Project String
(if applicable): _____

CONTRACTING DEPARTMENT: Probation

Service Requested: Review of Amendment
Description: Amendment to increase daily rate and increase Not To Exceed Amount
Contract Term: 1/1/2020 - 12/31/2022 Contract Value: increase to \$ 1,230,000.00

COUNTY COUNSEL: (must approve all contracts and MOU's)

Approved: Disapproved: Date: 12/02/2021 By: _____
Approved: Disapproved: Date: _____ By: _____

APPROVED BY SENIOR DEPUTY COUNTY COUNSEL PAULA FRANTZ ON 12/02/2021

COUNSEL -- PLEASE FORWARD TO HR AND RISK MANAGEMENT -- THANKS!

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: Lauren Montalvo 12/9/21 

RISK MANAGEMENT APPROVAL: (all contracts & MOU's except boilerplate grant funding contracts)

Approved: Disapproved: Date: 12/02/2021 By: _____
Approved: Disapproved: Date: _____ By: _____

Approved by Michael Andersen, Risk Manager

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments:
Approved: Disapproved: Date: _____ By: _____
Approved: Disapproved: Date: _____ By: _____

