

CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 10/03/2022

Need Date: 10/18/2022

PROCESSING DEPARTMENT:

Department: Sheriff
Dept. Contact: Tania Donnelly
Phone: x6636
Department Head Signature: Jon DeVille
Digitally signed by Jon DeVille
Date: 2022.10.03 11:28:13
-07'00'

CONTRACTOR:

Name: Dr. Michael C. Berry
Address: 1189 Elderberry Circle
Folsom, CA 95630
Phone: _____
Org Code: 2410
Project String
(if applicable): _____

CONTRACTING DEPARTMENT: Sheriff

Service Requested: Review Amendment II
Description: Amendment II to increase Compensation
Contract Term: 5/1/18-6/30/25 Contract Value: 2,000,000

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

Approved: Disapproved: Date: 10/11/2022 By: Stephen Mansell
Approved: Disapproved: Date: _____ By: _____
Digitally signed by Stephen Mansell
Date: 2022.10.11 14:29:12 -07'00'

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

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: _____

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

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

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

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

PLEASE EMAIL SIGNED DOCUMENT TO: