

REVIEW AND APPROVAL REQUESTED FOR:

☒ Contract ☐ Amendment ☐ Resolution ☐ Ordinance ☐ Policy ☐ Other

**County Counsel
REVIEW ROUTING SHEET**

Date Prepared: 7/1/25Need Date: 7/15/25**PROCESSING DEPARTMENT**

Department: Sheriff's Office
Dept Contact: Katie Cruickshank
Phone: 530-621-5609
Dept. Signature: Monica Ferguson Digitally signed by Monica Ferguson
Date: 2025.07.01 13:46:28 -07'00'
Title: _____

Org Code: 2420200
Funding Source: _____
PL String: _____
Legistar #: 25-1419

CONTRACT INFORMATIONCONTRACT #: 9722 CONTRACT AMENDMENT #: _____Contracting Department: Sheriff's OfficeContractor/Vendor Name: Cellebrite Inc.Contract Term: 10/15/25-10/14/26 Contract Value: \$115,800.00

Note - HR & RISK review will take place during Fenix Contract workflow - amendments see below.

ORDINANCE/RESOLUTION/POLICY INFORMATION

TITLE / SUBJECT: _____

NUMBER (If Assigned): _____

DESCRIPTION AND ADDITIONAL NOTES FOR COUNTY COUNSELReview and approve T&Cs for annual Cellebrite agreement for services**COUNTY COUNSEL**

Approved ☒ Disapproved ☐ Date: 7/30/25 By: Stephen L. Mansell Digitally signed by Stephen L. Mansell
Date: 2025.07.30 13:34:55 -07'00'
Approved ☐ Disapproved ☐ Date: _____ By: _____

COMMENTS Approved with negotiated terms and conditions.**CONTRACT AMENDMENT ONLY****HR APPROVAL**Compliance with Human Resources requirements? Yes: ☐ No: ☐

Compliance verified by: _____

RISK APPROVAL

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

COMMENTS _____