

CONTRACT ROUTING SHEET

Date Prepared: 7-19-11

Need Date: 7-26-11

PROCESSING DEPARTMENT:

Department: Sheriff

CONTRACTOR:

Name: Sacramento Valley Hi-Tech
Crimes Task Force

Dept. Contact: Sherry Bahlman

Address: P. O. Box 214327

Phone #: 621-5690

Sacramento, CA 95821

Department: _____

Phone: 916 874-3007

Head Signature: *Sherry Bahlman*

John D. [Signature]

CONTRACTING DEPARTMENT: Sheriff

Service Requested: MOU for HighTech Crimes needs to be resigned as it has corrections

Contract Term: 7-1-10 to 6-30-13 Contract Value: \$70,000

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

Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 9/2/11 By: *Ed Kraus*

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

*9/2/11 TC to S Bahlman
Need specifics of financial portion - all parties to bear costs
of their own actions. Comparative
No indemnity provision - ~~Contractor~~ negligence applies
It is not clear whether we are providing a full time or
part time c/ee. Supervision by Sgts in Sacto
Co. Sheriff's Dept.
Disputes to be resolved in ~~County~~ Sacramento County
Court.
Matter is subject to approval by Bd?
9/2/11 Mr Mustgo to [unclear] Liability provisions. Ed Kraus*

EL DORADO COUNTY COUNSEL
JUL 20 AM 10:30

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: Disapproved: _____ Date: 9/20/11 By: *Kher*

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

Per

RECEIVED
HUMAN RESOURCES DEPT.
11 SEP 30 AM 8:11

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

Departments: _____

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

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