

CONTRACT ROUTING SHEET

Date Prepared: 08/09/19

Need Date: 10/01/19

PROCESSING DEPARTMENT:

Department: Sheriff's Office

Dept. Contact: Sara Dougherty

Phone #: 530-621-5657

Department: J. W. 8/9/19

Head Signature: _____

CONTRACTOR:

Name: Relias Learning LLC dba Essential Learning Systems

Address: Dept CH 16894 Palatine, IL 60055

Phone: 530-893-3734

CONTRACTING DEPARTMENT: Sheriff's Office

Service Requested: Review and approval of Relias Learning Master Services Agreement

Contract Term: 10/01/19-09/30/26 Contract Value: \$ 82,116.45

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

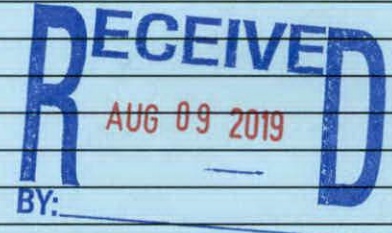
Compliance verified by: M. D. 8/22/19

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

Approved: ✓ Disapproved: _____ Date: 8/14/19 By: Stephen J. Maxwell

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

Approved as revised, 8/14/19.



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

Approved: _____ Disapproved: X Date: 8/22/19 By: LC for MEP

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

Risk advised to replace the indemnification in 8.2 with the County Standard Language. Section 8.3 to be deleted and replaced with County Standard Insurance requirements. We agree with Counsel, the venue for litigation should be California not North Carolina. The department notified that they are moving forward without these changes and Risk's approval.

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

Departments: _____

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

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