

# CONTRACT ROUTING SHEET

Date Prepared: 3-15-11

Need Date: 3-29-11

**PROCESSING DEPARTMENT:**

Department: Sheriff

Dept. Contact: Sherry Bahlman

Phone #: 621-5690

Department: \_\_\_\_\_

Head Signature: Sherry Bahlman

**CONTRACTOR:**

Name: Identix, Inc.

Address: 5705 West Old Shokopee Rd.,

Ste 100

Bloomington, MN 55347

Phone: 952 945-3373

EL DODD COUNTY COUNSEL  
2011 MAR 7 AM 11:01

John D. [Signature]

**CONTRACTING DEPARTMENT:** Sheriff

Service Requested: Equip maintenance on LiveScan fingerprinting equipment

Contract Term: 7-1-11 to 6-30-12 Contract Value: \$55,963

Compliance with Human Resources requirements? Yes: x No: \_\_\_\_\_

Compliance verified by: Chris Little/HR has no objections to this contract

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

Approved:  Disapproved: \_\_\_\_\_ Date: 5/11/11 By: Justin Ken

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

3/15/11 See memo - sjb  
Non standard indemnification - mutual

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved:  Disapproved: \_\_\_\_\_ Date: 5/11/11 By: [Signature]

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: \_\_\_\_\_

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