

# CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: November 19, 2018

Need Date: ASAP

**PROCESSING DEPARTMENT:**

Department: Probation  
Dept. Contact: Rena Russell  
Phone: 530-621-6519  
Department  
Head Signature: [Signature]

**CONTRACTOR:**

Name: Alcohol Monitoring Systems  
Address: 1241 West Mineral Av, Ste 200  
Littleton, CO 80120  
Phone: 303-483-0558  
Org Code: 254100

**CONTRACTING DEPARTMENT:** Probation

Service Requested: Probation Dept Amendment extending contract of Alpha Testing Site  
Contract Term: 12/31/18-9/31/19 Contract Value: 0.00 *- NO tag from amend but doesn't ing know amt?*

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

Approved:  Disapproved:  Date: 11/27/18 By: [Signature]  
Approved:  Disapproved:  Date: 12/4/18 By: [Signature]  
*Need org Agmt when making amends to it.*

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

**HR APPROVAL:**

Compliance with Human Resources requirements? Yes: \_\_\_\_\_  
Compliance verified by: V/A [Signature]

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

Approved:  Disapproved:  Date: 12/5/18 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: \_\_\_\_\_

EL DORADO COUNTY COUNSEL  
2018 NOV 26 4:56 PM  
2018 DEC 4 11:54 AM