

CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 03/13/2024

Need Date: 03/27/2024

PROCESSING DEPARTMENT:

Department: SHERIFF
Dept. Contact: TANIA DONNELLY
Phone: 530-621-6636
Department: Monica
Head Signature: Ferguson

Digitally signed by Monica Ferguson
Date: 2024.03.13 11:09:52 -07'00'

CONTRACTOR:

Name: JUDY KNAPP CONSULTING/PREVENTIONWORKS
Address: _____
Phone: _____
Org Code: _____
Project String
(if applicable): 243 0

CONTRACTING DEPARTMENT: SHERIFF

Service Requested: REVIEW AND APPROVE
Description: AMD I TO INCREASE COMP
Contract Term: 3/17/22-3/16/2025 Contract Value: \$100,000

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

Approved: Disapproved: Date: 03/19/2024 By: Stephen Mansell
Approved: Disapproved: Date: 03/21/2024 By: Stephen Mansell

Revised version with new indemnity clause approved on 3/21/24.

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

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: Lauren Montalvo

Digitally signed by Lauren Montalvo
Date: 2024.03.26 08:55:25 -07'00'

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

Approved: Disapproved: Date: 03/25/2024 By: Lavleen K. Cheema
Approved: Disapproved: Date: _____ By: _____

Digitally signed by Lavleen K. Cheema
Date: 2024.03.25 21:43:17 -07'00'

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

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

PLEASE EMAIL SIGNED DOCUMENT TO: