

# CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 09/09/2020

Need Date: 09/16/2020

**PROCESSING DEPARTMENT:**

Department: CAO- Procurement and Contracts  
Dept. Contact: Tyler prince  
Phone: X6438  
Department Head Signature: S. R. Ewert  
Digitally signed by S. R. Ewert  
Date: 2020.09.08 13:50:53  
-07'00'  
Sandy Ewert  
Administrative Analyst Supervisor

**CONTRACTOR:**

Name: York Risk Services Group, Inc.  
Address: P.O. Box 619079  
Roseville, CA 95661  
Phone: 916-960-1017  
Org Code: 0920000  
Project String (if applicable): \_\_\_\_\_

**CONTRACTING DEPARTMENT:** Risk Management

Service Requested: Review and Approve  
Description: Second Amendment to Agreement for Third Party Administrator for Worker's Compensation Claims Services.  
Contract Term: Perpetual Contract Value: \$140,264

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

Approved:  Disapproved:  Date: 09/11/2020 By: Roger A. Runkle  
Digitally signed by Roger A. Runkle  
Date: 2020.09.11 14:09:38 -07'00'  
Approved:  Disapproved:  Date: \_\_\_\_\_ By: \_\_\_\_\_

**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: 2020.09.14 09:00:26 -07'00'

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

Approved:  Disapproved:  Date: 09/12/2020 By: Robert R. Schroeder  
Digitally signed by Robert R. Schroeder  
Date: 2020.09.12 11:14:27 -07'00'  
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: \_\_\_\_\_