

CONTRACT ROUTING SHEET

Date Prepared: ~~11/29/06~~ 11/29/06

Need Date: _____

PROCESSING DEPARTMENT:

Department: CAO/Proc. & Contracts
Dept. Contact: Pam Carlone
Phone #: 5833

CONTRACTOR:

Name: G4S Justice Services, Inc.
Address: 30201 Aventura
Rancho Santa Margarita, CA
92688
Phone: 800-589-6003

Department Head Signature: Bonnie H. Rich
Bonnie H. Rich

CONTRACTING DEPARTMENT:

Probation

Service Requested: Hardware/Software for Electronic Monitoring Program

Contract Term: 3 Years Contract Value: \$267,000.00

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

Compliance verified by: _____

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

Approved: Disapproved: _____ Date: 12-1-06 By: [Signature]

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

DATE: 12/01/2006
 ATTORNEY: [Signature]
 DEPT. INDEX NO.: [Signature]
 BY: [Signature]

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: Disapproved: _____ Date: 12/4/06 By: [Signature]

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

DEC 01 2006

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

Departments: _____

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

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