

CONTRACT ROUTING SHEET

Date Prepared: 7/22/15

Need Date: 7/31/15

PROCESSING DEPARTMENT:

Department: Sheriff's Office
Dept. Contact: Tania Donnelly

CONTRACTOR:

Name: USDOJ - DEA
Address: Domestic Cannabis Eradication Program

Phone #: 621-6636

Department Head Signature: *Jon Donnelly* 7-22-15

Phone: _____

CONTRACTING DEPARTMENT: Sheriff

Service Requested: LOA between EDSO and DEA for marijuana suppression - Amendment I

Contract Term: 01/01/15 - 12/31/15 Contract Value: \$80,000 - Amendment to increase to \$94,000

Compliance with Human Resources requirements? Yes: _____ No: N/A
Compliance verified by: _____

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

Approved: _____ Disapproved: _____ Date: 7/23/15 By: *Ken*
Approved: _____ Disapproved: _____ Date: _____ By: _____

TC w T Donnelly. See 5/1/15 comments on original. Dept will identify contract administrator (I understand that this will be the Sheriff)
Done 7/23/15
Tania Donnelly

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

Approved: _____ Disapproved: _____ Date: 7/28/15 By: *gy*
Approved: _____ Disapproved: _____ Date: _____ By: _____

No insurance Nothing for Risk

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

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

EL PASO COUNTY COUNSEL
15 JUL 22 PM 1:15

HUMAN RESOURCES DEPT.
15 JUL 20 AM 10:09