


# CONTRACT ROUTING SHEET

Date Prepared: March 20<sup>th</sup>, 2015

Need Date: ASAP

**PROCESSING DEPARTMENT:**

Department: Procurement & Contracts  
Dept. Contact: Ashley Boyd  
Phone #: x5804  
Department Head Signature: 

**CONTRACTOR:**

Name: Liebert Cassidy Whitmore  
Address: 6033 W. Century Blvd., 5<sup>th</sup> Floor  
Los Angeles, CA 90045  
Phone: 310-981-2000

**CONTRACTING DEPARTMENT:** Human Resources

Service Requested: Employment Relations/Labor Negotiations  
Contract Term: Three (3) Years - through Sept 2015 Contract Value: \$330,000.00  
Compliance with Human Resources requirements? Yes:            No:             
Compliance verified by: N/A - Language Revision Only - Reduction in Rates/Fees

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

Approved: X Disapproved:            Date: 3/27/15 By: [Signature]  
Approved:            Disapproved:            Date:            By:           

*This isn't a reduction - its the same amt as previously listed in Amnt 11, Sch. #A"*

*- Note: This Amndmt does not alter the term - which under last amndmt is through Sept 2015.  
- It doesnt "reduce" the rates, it states the same rates that became effective in Oct 2014 - so only change appears to be in #14, Contract Administrator.*

*\* THERE IS NO CHANGE REQUESTED FOR THE TERM OF THIS AMD.  
\* YES, THERE IS A REDUCTION IN RATES/FEE'S. WE WILL NO LONGER PAY THE MONTHLY RETAINER FEE OF \$9,890 PER MONTH. EFFECTIVE 2/1/15, WE WILL PAY FOR SERVICES HOURLY BASED ON THE INCORPORATED RATE SHEET.*

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

Approved: ✓ Disapproved:            Date: 3/30/15 By: [Signature]  
Approved:            Disapproved:            Date:            By:           

COMPLIANT IN EBIX.

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

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

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