## CONTRACT ROUTING SHEET

## Date Prepared: 7/29/2013 $8 / 24 / 13$

 PROCESSING DEPARTMENT:Department:
Dept. Contact:
Phone \#:
Department
Head Signature:

Child Support Services


Laura D. Roth

Need Date: ASAP
CONTRACTOR:
Name: Columbia Ultimate Inc.,
Address: $\quad 4400$ NE $77^{\text {th }}$ Ave, Suite F to Vancouver, WA 98662 ㅇ
Phone

| Vancouver, WA 986.62 o |
| :--- |
| $360-260-5838$ |

CONTRACTING DEPARTMENT: Child Support Services, Revenue Recovery Division
Service Requested: Detailed review of Proposed Agreement for system upgrade
Contract Term: Support = Perpetual Contract Value:
Compliance with Human Resources requirements?
Compliance verified by: G. Harms
COUNTY COUNSEL: (Must approve all contracts Disapproved: $\qquad$
$\$ 45,000$
Yes: X
MIRE STRECLA
$\stackrel{\rightharpoonup}{\omega}$

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: $\quad$ Disapproved: $\quad$ Date: $9: 9 . / 3$
Approved: $\quad$ By:


## OTHER APPROVAL: (Specify departments) participating or directly affected by this contract)

Departments: IT
Approved:
Approved:
( hiwnoj 00\%8007
N0 : Contract terms have been revised to address issues identified un IT memo.

