

CONTRACT ROUTING SHEET

Date Prepared: 03/27/14

Need Date: 04/25/14

PROCESSING DEPARTMENT:

Department: Sheriff's Office
Dept. Contact: Tania Donnelly
Phone #: 621-6636
Department
Head Signature: *Jon D. [Signature]* 4/11/14

CONTRACTOR:

Name: Comcast
Address: 3011 Comcast Place, Ste 5113
Livermore, CA 94551
Phone: _____

Jon D. [Signature] 4/9/14

CONTRACTING DEPARTMENT: Sheriff

Service Requested: Amendment to increase monthly billing rate for higher speed Internet Service
Contract Term: Remainder term-8 mons Dec 2013-July 2014 Contract Value: -1,519 \$7,074.80*

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

COUNTY COUNSEL: (Must approve all contracts and MOU's) Please Note: Contract Term is for the December 2013 – July 26, 2014 = \$189.85 X 8 = \$1,518.80

Approved: ✓ as to terms as described below Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____

I understand that you will put information in regard to the 8 month increase in the contract itself not just on the blue row (distinguish what rates will be paid during what parts of the 36 month term) Also the contract value above needs to include the total contract value, not just the increase in the cost of the contract during the 8 mths. This contract cannot be approved without these clarifications in the contract itself.

*TOTAL CONTRACT AMOUNT HAS BEEN REVISED 4/4/14

EL DORADO COUNTY COUNSEL
2014 APR -1 PM 1:00
Tania Donnelly
RECEIVED
HUMAN RESOURCES DEPT
APR -3 AM 9:53

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

Approved: ✓ Disapproved: _____ Date: 4/3/14 By: [Signature]
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: _____