

# CONTRACT APPROVAL AND PREPARATION REQUEST

## CITY AND COUNTY OF DENVER

<b>To:</b> Mayor / City Attorney		<b>Call ID / Ticket #:</b> 00 082 062				
<b>Attention:</b> Deanne Durfee		<b>Contract Administration Officer:</b> Sheri Zamora-Gutierrez				
<b>Date:</b> 2010-10-25		<b>Phone:</b> 720-913-6329				
<b>Initiating City Agency/Authority:</b> Police		<b>Division:</b> DPD				
<b>Agency Contact Familiar with this Contract:</b> Sheri Zamora 720-913-6329						
1. Was this contractor selected by competitive process: Yes						
2. City Council approval is required prior to entering this contract: Yes						
3. A Pre-Encumbrance has been entered into PeopleSoft: No <span style="float: right;">Prevailing Wage Contract? F</span>						
4. Contractor Info & VendorID: <b>3649</b> ACS State & Local Solutions, Inc. 12410 Milestone Center Drive Germantown, MD 20876		5. Contract Control Number: <b>CE-01061 - 01</b>				
		6. Type of Contract: Exp. T Rev. F Orig. F Amend. T				
		7. Type of Entity: Corporation				
		8. IRS / SSN #: 131996647				
		9. Project/Grant ID + Name:				
		10. Ordinance: Series: 2010				
		11. Proposed Term: 2010-01-01 to 2011-12-31 Existing Term: 2010-01-01 to 2010-12-31				
12. Current contract request amount: \$141,600.00						
13. If amendment, previous total: \$416,800.00		14. Total with amendments: \$558,400.00				
15. Additional Business Units Planning to use this Contract:						
16.	<u>Bus. Unit</u>	<u>Fund</u>	<u>Org.</u>	<u>Acct.</u>	<u>Project/Grant</u>	<u>Amounts</u>
Funding Sources:	1 POLIC	01010	3513200	604600		\$141,600.00
	2					\$0.00
	3					\$0.00
	4					\$0.00
	5					\$0.00
	6					\$0.00
17. Contract Request Description:	Continuation of the Photo Red Light System, monthly service fees of \$11,800/month; and extension of service term for one year through 12/31/2011.					
18. Supplemental Materials - transmit to City Attorney as e-mail attachment or hardcopy:						
<input type="checkbox"/> Cert. of Insurance	<input type="checkbox"/> Evidence of Bonding	<input type="checkbox"/> Real Estate Desc.				
<input type="checkbox"/> RFP	<input type="checkbox"/> RFQ	<input type="checkbox"/> Scope of Work	<input type="checkbox"/> Other			
<b>APPROVALS:</b> Add agencies as needed: Facilities Planning and Management Council on Disabled Career Service Authority	Dept/Agency Head:					Date:
	Risk Management:					Date:
	Other Authority:					Date:
	Other Authority:					Date:
	Other Authority:					Date:
	Other Authority:					Date:
	Other Authority:					Date:
	Mayor Signature Date:					Date:
Auditor Signature Date:					Date:	
<b>CERTIFICATION:</b> I hereby certify that the articles or services requested herein are necessary for the operation of this agency, are not available within existing resources, are properly chargeable to the accounts detailed above in respect to which funds have been pre-encumbered, and that this proposed undertaking is in conformity with the Mayor's policy.						
Initiating Authority _____			Date _____		City Attorney _____	
					Date: _____	