

CONTRACT APPROVAL AND PREPARATION REQUEST

CITY AND COUNTY OF DENVER

To: Mayor / City Attorney		Call ID / Ticket #: 00 081 669																																																		
Attention:		Contract Administration Officer: Sheri Zamora-Gutierrez																																																		
Date: 2010-09-23		Phone: 720-913-6329																																																		
Initiating City Agency/Authority: Police		Division: DPD																																																		
Agency Contact Familiar with this Contract: Sheri Zamora 720-913-6329																																																				
1. Was this contractor selected by competitive process: No -->Noted Reason: Grant Revenue																																																				
2. City Council approval is required prior to entering this contract: Yes																																																				
3. A Pre-Encumbrance has been entered into PeopleSoft: No		Prevailing Wage Contract? F																																																		
4. Contractor Info & VendorID: Department of Justice Office of Justice Programs 810 Seventh Street, NW Washington, DC 20531		5. Contract Control Number: GC-02028 - 00																																																		
		6. Type of Contract: Exp. F Rev. T Orig. T Amend. F																																																		
		7. Type of Entity: Federal Government																																																		
		8. IRS / SSN #:																																																		
		9. Project/Grant ID + Name: 2010-DN-BX-K004																																																		
		10. Ordinance: Series: 2010																																																		
		11. Proposed Term: 2010-11-01 to 2012-04-30 Existing Term: to																																																		
12. Current contract request amount: \$596,273.00																																																				
13. If amendment, previous total: \$0.00		14. Total with amendments: \$596,273.00																																																		
15. Additional Business Units Planning to use this Contract:																																																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>16.</th> <th>Bus. Unit</th> <th>Fund</th> <th>Org.</th> <th>Acct.</th> <th>Project/Grant</th> <th>Amounts</th> </tr> </thead> <tbody> <tr> <td>Funding Sources:</td> <td>1</td> <td>POLIC</td> <td>12220</td> <td>3518101</td> <td>343004</td> <td style="text-align: right;">\$596,273.00</td> </tr> <tr> <td></td> <td>2</td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td></td> <td>3</td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td></td> <td>4</td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td></td> <td>5</td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td></td> <td>6</td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: right;">\$0.00</td> </tr> </tbody> </table>				16.	Bus. Unit	Fund	Org.	Acct.	Project/Grant	Amounts	Funding Sources:	1	POLIC	12220	3518101	343004	\$596,273.00		2					\$0.00		3					\$0.00		4					\$0.00		5					\$0.00		6					\$0.00
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17. Contract Request Description:		FY2010 Solving Cold Cases with DNA grant award to fund DPD Crime Lab personnel, equipment, supplies focused at identification and review of cold case homicides from pre-1985; and, lab requests on cold case homicides from 1986-2006. XO15 #543 CFDA #16.560 Chartfield SCCDNA2010																																																		
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																																																	
APPROVALS: Add agencies as needed: Facilities Planning and Management Council on Disabled Career Service Authority	Dept/Agency Head:		Date:																																																	
	Risk Management:		Date:																																																	
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	Auditor Signature Date:		Date:																																																	
CERTIFICATION: 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 _____		City Attorney _____																																																		
Date _____		Date: _____																																																		