

# CONTRACT APPROVAL AND PREPARATION REQUEST

## CITY AND COUNTY OF DENVER

<b>To:</b> Mayor / City Attorney		<b>Call ID / Ticket #:</b> 00 081 671																																																		
<b>Attention:</b>		<b>Contract Administration Officer:</b> Sheri Zamora-Gutierrez																																																		
<b>Date:</b> 2010-09-23		<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: 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																																																		
<b>4. Contractor Info &amp; VendorID:</b>  Department of Justice Office of Justice Programs 810 Seventh Street, NW Washington, DC 20531		5. Contract Control Number: <b>GC-02027 - 00</b>																																																		
		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-K158																																																		
		10. Ordinance: Series: 2010																																																		
		11. Proposed Term: 2010-10-01 to 2012-03-31 Existing Term: to																																																		
12. Current contract request amount: \$203,992.00																																																				
13. If amendment, previous total: \$0.00		14. Total with amendments: \$203,992.00																																																		
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</td> <td>1</td> <td>POLIC</td> <td>12220</td> <td>3518101</td> <td>343004</td> <td style="text-align: right;">\$203,992.00</td> </tr> <tr> <td>Sources:</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	1	POLIC	12220	3518101	343004	\$203,992.00	Sources:	2					\$0.00		3					\$0.00		4					\$0.00		5					\$0.00		6					\$0.00
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17. Contract Request Description: FY2010 Forensic DNA Backlog Reduction Program grant award to prevent DNA backlogs awaiting analysis and improve throughput of forensic DNA sample testing. Grant will fund equipment that exceeds in cost of \$50,000 (Ord req); and, will fund personnel, training, other equipment, and supplies. XO15# 605 CFDA #16.741 Chartfield DNABR2010																																																				
18. Supplemental Materials - transmit to City Attorney as e-mail attachment or hardcopy:																																																				
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<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: _____																																																		
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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		_____ City Attorney																																																		
_____ Date		_____ Date:																																																		