



**BOARD OF SUPERVISORS AGENDA ITEM REPORT  
CONTRACTS / AWARDS / GRANTS**

Award  Contract  Grant

Requested Board Meeting Date: 8/7/2018

\* = Mandatory, information must be provided

or Procurement Director Award

**\*Contractor/Vendor Name/Grantor (DBA):**

Green Valley Sheriff Auxiliary Volunteers of Green Valley District Areas, Inc.

**\*Project Title/Description:**

Property Loss Protection - Green Valley SAV Vehicles

**\*Purpose:**

Property Loss Protection - Green Valley SAV Vehicles

**\*Procurement Method:**

Procurement Exempt D29.4

**\*Program Goals/Predicted Outcomes:**

Green Valley Sheriff Auxiliary Volunteers provide assistance to the Pima County Sheriff's Department and the citizens of Pima County.

**\*Public Benefit:**

Green Valley Sheriff Auxiliary Volunteers provide assist the Pima County Sheriff's Department and the citizens of Pima County in providing crime prevention and law enforcement support services in unincorporated area of Green Valley.

**\*Metrics Available to Measure Performance:**

Safe driving and availability to respond in a timely manner.

**\*Retroactive:**

Yes. Green Valley SAV amendment was recieved by the Sheriff's Department on 6/11/2018 and sent to the Finance Director Mr. Keith Dommer for signature. The Sheriff's Department received the amendment back from the Finance Director on 6/19/2018 and forwarded to Mr. Huckelberry for signature on 6/19/2018. Due to time constraints for processing through procurement the next eligible Board of Supervisor meeting is 8/7/2018.

To: COB - 6.22.18  
Pgs - 2  
(1)

**Contract / Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e.,15-123): \_\_\_\_\_

Effective Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Prior Contract Number (Synergen/CMS): \_\_\_\_\_

Expense Amount: \$\* \_\_\_\_\_  Revenue Amount: \$ \_\_\_\_\_

**\*Funding Source(s) required:**

Funding from General Fund?  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

Contract is fully or partially funded with Federal Funds?  Yes  No

**\*Is the Contract to a vendor or subrecipient?** \_\_\_\_\_

Were insurance or indemnity clauses modified?  Yes  No

*If Yes, attach Risk's approval*

Vendor is using a Social Security Number?  Yes  No

*If Yes, attach the required form per Administrative Procedure 22-73.*

**Amendment / Revised Award Information**

Document Type: CT Department Code: SD Contract Number (i.e.,15-123): 18\*041

Amendment No.: 1 AMS Version No.: 02 HL

Effective Date: 07/01/18 New Termination Date: 06/30/19

Prior Contract No. (Synergen/CMS): \_\_\_\_\_

Expense or  Revenue  Increase  Decrease Amount This Amendment: \$ 0.00

Is there revenue included?  Yes  No If Yes \$ \_\_\_\_\_

**\*Funding Source(s) required:** General Fund Risk Management

Funding from General Fund?  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**Grant/Amendment Information** (for grants acceptance and awards)  Award  Amendment

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Grant Number (i.e.,15-123): \_\_\_\_\_

Effective Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Amendment Number: \_\_\_\_\_

Match Amount: \$ \_\_\_\_\_  Revenue Amount: \$ \_\_\_\_\_

**\*All Funding Source(s) required:**

**\*Match funding from General Fund?**  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**\*Match funding from other sources?**  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**\*Funding Source:** \_\_\_\_\_

**\*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?** \_\_\_\_\_

Contact: Bonnie Schaeffer

Department: Sheriff Telephone: 351-6374

Department Director Signature/Date: *J. G. Gater* 6/19/2018

Deputy County Administrator Signature/Date: \_\_\_\_\_

County Administrator Signature/Date: *C. R. DeWitt* 6/19/18  
*(Required for Board Agenda/Addendum Items)*

<p><b>Pima County Sheriff's Department</b></p> <p><b>Project: Property Loss Protection</b></p> <p><b>Contractor: Sheriff's Auxiliary Volunteers of Green Valley District Area, Inc.</b></p> <p><b>Contract No.: CT 18*041</b></p> <p><b>Contract Amendment No.: 1</b></p>	<table border="1"> <tr> <td colspan="2" style="text-align: center;"><b>CONTRACT</b></td> </tr> <tr> <td><b>NO.</b></td> <td><u>CT-SD-18-041</u></td> </tr> <tr> <td><b>AMENDMENT NO.</b></td> <td><u>01</u></td> </tr> <tr> <td colspan="2">           This number must appear on all invoices, correspondence and documents pertaining to this contract.         </td> </tr> </table> <p>(STAMP HERE)</p>	<b>CONTRACT</b>		<b>NO.</b>	<u>CT-SD-18-041</u>	<b>AMENDMENT NO.</b>	<u>01</u>	This number must appear on all invoices, correspondence and documents pertaining to this contract.	
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<b>Orig. Contract Term:</b> 07/01/2017 - 06/30/2018	<b>Orig. Amount:</b>	\$200,000.00
<b>Termination Date Prior Amendment:</b> 06/30/18	<b>Prior Amendments Amount:</b>	\$ 0.00
<b>Termination Date This Amendment:</b> 06/30/19	<b>This Amendment Amount:</b>	\$ 0.00
	<b>Revised Total Amount:</b>	\$200,000.00

**CONTRACT AMENDMENT**

The parties agree to amend the above-referenced contract as follows:

1. **Term.** The Contract terminates on June 30, 2019.
  
2. **Scope of Services.** The parties have revised the Scope of Services as follows:  
 Delete vehicle 2008 Dodge Durango, VIN 1D8HD48268F100523, AZ Plate ACP-2920  
 Delete vehicle 2008 Dodge Durango, VIN 1D8HD48218F114748, AZ Plate AAS-5101  
 Add vehicle 2018 Ford Explorer, VIN 1FM5K8ARXJGB12952, AZ Plate CGB0760  
 Add vehicle 2018 Ford Explorer, VIN 1FM5K8AR1JGB12953, AZ Plate CGB0761  
 VIN # on 2016 Ford Explorer AZ Plate BTB4730 should be 1FM5K8AR4GGC61852.

The effective date of this Amendment is April 30, 2018.

All other provisions of the Contract not specifically changed by this Amendment remain in effect and are binding upon the parties.

**PIMA COUNTY**

\_\_\_\_\_  
Chairman, Board of Supervisors

\_\_\_\_\_  
Date

**ATTEST**

\_\_\_\_\_  
Clerk of the Board

\_\_\_\_\_  
Date

**APPROVED AS TO FORM**

*[Signature]*  
Deputy County Attorney

**SEAN HOLGUIN**

\_\_\_\_\_  
Print DCA Name

5/30/18  
Date

**APPROVED AS TO CONTENT**

*[Signature]*  
Director, Pima County Finance and Risk Management

6/14/18  
Date

**CONTRACTOR**

*[Signature]*  
Authorized Officer Signature

CHARLES A. WINKENWERDER  
Printed Name and Title **PRESIDENT**

6/11/18  
Date

**APPROVED AS TO CONTENT**

*[Signature]*  
Department Head

6/1/18  
Date