

City Agreement Routing Form

The Project Administrator should complete the top section of this form, once Department Head/Designee signature has been obtained, attach the specified number of agreement originals to this form (have the contractor/supplier sign all original copies before routing) and forward the documents to the City Clerk for internal city routing. The City Clerk will route the agreement to the Risk Manager for approval of insurance and indemnification requirements, to the City Attorney for approval as to legal form and to the Mayor for signature. The City Clerk will then attest/authenticate the Mayor's signature and will forward this form and remaining agreement(s) to Project Administrator.

Project Title: Amendment 6 to the ILA between the City of Redmond and South Correctional Entity (SCORE) for inmate housing services - Contract # 7512

Type of Service: South Correction Entity (SCORE)

Supplier/Contractor Name: South Correction Entity (SCORE)

Contract/Agreement Amount, Original: \$ 120.00 per bed Amended Amount: \$ 124.00 per bed

Council Approval Date: 7/17/18 Nature of Funding: General budget

Project Administrator: Captain Ron Harding MailStop: PSPDA Phone: X2589

Anticipated Agreement Start Date: 1/1/2019 Estimated Completion Date: _____

Does this contract contain the purchase of technology related items/services? YES NO
 If Yes, route to: I.S. Manager (3SFN)

I.S. Signature: _____ Date: _____

Will federal funds be used to pay for all or part of contract? YES NO
 If Yes, check for debarment at www.sam.gov
 (print results and keep a copy in project file)

Department Head/Designee Signature: Ron Harding Date: 7.26.18

Comments: _____

Account Numbers/
Distribution

NIGP/Commodity Code: _____

ROUTING PROCESS: (2 copies) Please return to Rena. To be sent to SCORE for signatures.

To: City Clerk M Date 8/1/18

 (for routing and tracking)

Risk Manager [Signature] Date 8/1/18

 (Signature or initials)

City Attorney [Signature] Date 8/7/18

 (Signature or initials)

(Note: If contract exceeds Mayor's authorized signing limits, route to City Clerk (3NFN) for council approval)

Mayor [Signature] Date _____

 (Signature or initials)

City Clerk M Date 8/7/18

 (Signature or initials)

NOTE: The agreement becomes fully executable once the Mayor has signed it. The Project Administrator may then forward one set of originals to the Contractor/Consultant and work may begin. The City's original will be retained by the City Clerk. Once all signatures have been obtained, forward a copy of this form to Accounts Payable, with payment instructions.

Finance use ONLY Supplier Id: Date Received: Agreement # 7512-6

Interlocal

7512-6

AMENDMENT # 6 TO ORIGINAL AGREEMENT FOR INMATE HOUSING


THIS AMENDMENT TO INTERLOCAL AGREEMENT FOR INMATE HOUSING dated as of August 1, 2018, 2018 (hereinafter "Amendment to Original Agreement") is made and entered into by and between the **South Correctional Entity**, a governmental administrative agency formed pursuant to RCW 39.34.030(3) ("SCORE") and the City of Redmond (hereinafter the "City" and together with SCORE, the "Parties" or individually a "Party"). This Amendment to Original Agreement is intended to supplement and amend that certain Agreement for Inmate Housing between the Parties dated 2-1-2014, as it may have been previously amended (the "Original Agreement"). The Parties hereto mutually agree as follows:

- 2019 Bed Rates.** Section 27 (Bed Rate) of the Original Agreement is hereby amended to include the following guaranteed and non-guaranteed bed rates for inmate housing:

Guaranteed Bed Rate:	\$124.00	<u>20</u>	No. of Guaranteed Beds
Non-Guaranteed Bed Rate:	\$180.00	_____	
- Effective Date; Execution.** The bed rates provided for in Section 1 of this Amendment to Original Agreement shall become effective **January 1, 2019**. This Amendment to Original Agreement may be executed in any number of counterparts.
- Ratification and Confirmation.** All other terms and conditions of the Original Agreement are hereby ratified and confirmed.

IN WITNESS WHEREOF, the Parties have executed this Amendment to Original Agreement as of the date first mentioned above.

Agency Name: _____

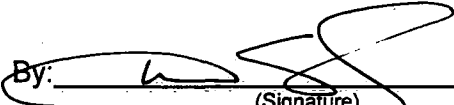
By: 
 (Signature)

Name: MAURY FILES

Title: FINANCE DIRECTOR

Date: 8/1/18

South Correctional Entity (SCORE)

By: 
 (Signature)

Name: Devon Schrum

Title: Executive Director

Date: 10.03.18