

C-2015-13

Washington State Military Department AMENDMENT

1. CONTRACTOR NAME/ADDRESS: Pend Oreille County Post Office Box 5025 Newport, Washington 99156		2. CONTRACT NUMBER: E15-034	3. AMENDMENT NUMBER: B
4. CONTRACTOR CONTACT, PHONE/EMAIL: Steve West / 509.447.1912 swest@pendoreille.org		5. MD STAFF CONTACT, PHONE/EMAIL: Teresa C Lewis/253.512.7481 teresa.lewis@mil.wa.gov	
6. TIN or SSN: 91-6001357	7. CATALOG OF FEDERAL DOMESTIC ASST. (CFDA) #: NONE	8. FUNDING SOURCE NAME/AGREEMENT #: E911 Wireline and Wireless	
9. FUNDING AUTHORITY: Washington State Military Department (DEPARTMENT) and RCW 38.52.510 / WAC 118-66 Enhanced 911			
10. DESCRIPTION/JUSTIFICATION OF AMENDMENT, MODIFICATION, OR CHANGE ORDER: This amendment adjusts the funds in the Budget Sheet (Attachment D) based on updated expenditures and projected revenues.			
11. AMENDMENT TERMS AND CONDITIONS: <ol style="list-style-type: none"> Contract expiration date of August 15, 2015 remains unchanged. Contract performance period of July 1, 2014 through June 30, 2015 remains unchanged. Change the overall contract amount from \$533,107 to \$801,752; an increase of \$268,645 Change the FY15 CPD Wireline funding amount from \$7,362 to \$61,002; an increase of \$53,640 Change the FY15 OPS Wireline funding amount from \$85,311 to \$86,431; an increase of \$1,120 Change the FY15 CPD Wireless funding amount from \$29,448 to \$244,008; an increase of \$214,560 Change the FY15 OPS Wireless funding amount from \$410,986 to \$410,311; a decrease of \$675 Replace the existing Budget Sheet, Attachment D (Amendment A) with the Revised Budget Sheet, Attachment D, attached. <p>This Amendment is incorporated in and made a part of the contract. Except as amended herein, all other terms and conditions of the contract remain in full force and effect. Any reference in the original contract or an Amendment to the "contract" shall mean "contract as amended". The Department and Contractor acknowledge and accept the terms of this Amendment as identified above, effective on the final date of execution below. By signing this Amendment, the signatories warrant they have the authority to execute this Amendment.</p>			
IN WITNESS WHEREOF, the parties hereto have executed this amendment as of the date and year last written below:			
FOR THE DEPARTMENT:		FOR THE CONTRACTOR:	
_____ Signature Date		_____ Signature Date	
Richard A. Woodruff, Contracts Administrator Washington State Military DEPARTMENT		Stephen Kiss, Chairman Board of Commissioners	
BOILERPLATE APPROVED AS TO FORM: Dawn Cortez (signature on file) 7/8/2014 Assistant Attorney General		for Pend Oreille County	

Form Date: 10/27/00

COPY

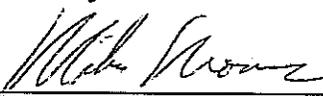
ATTACHMENT D
REVISED BUDGET SHEET
E911 COUNTY OPERATIONS CONTRACT - FY2015
 July 1, 2014 – June 30, 2015

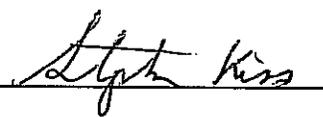
	SFY2015 - Original		SFY2015 – Amend A Budget		SFY2015 – Revised Amend B Budget	
	WIRELINE/ VoIP	WIRELESS/ PREPAID	WIRELINE/ VoIP	WIRELESS/ PREPAID	WIRELINE/ VoIP	WIRELESS/ PREPAID
*Estimated County E911 Excise Tax Revenue	\$ 32,508	\$ 73,702	\$ 35,790	\$ 73,420	\$ 34,670	\$ 74,095
Coordinator Professional Development	\$ 8,220	\$ 32,880	\$ 7,362	\$ 29,448	\$ 61,002	\$ 244,008
Operational (OPS)	\$ 88,593	\$ 410,704	\$ 85,311	\$ 410,986	\$ 86,431	\$ 410,311
Capital Equipment	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
FISCAL YEAR TOTALS Not to Exceed	\$ 96,813	\$ 443,584	\$ 92,673	\$ 440,434	\$147,433	\$654,319
TOTAL CONTRACT NOT TO EXCEED	\$ 540,397		\$ 533,107		\$ 801,752	

SIGNATURE AUTHORIZATION FORM
WASHINGTON STATE MILITARY DEPARTMENT
CAMP MURRAY, WASHINGTON 98430-5122

NEW FORM WILL REPLACE PREVIOUS FORMS

NAME OF ORGANIZATION Pend Oreille County	DATE SUBMITTED 8-Jun-15
PROJECT DESCRIPTION FY15 E911 County Contract	CONTRACT NUMBER E15 -034

1. AUTHORIZING AUTHORITY		
SIGNATURE	PRINT OR TYPE NAME	TITLE/TERM OF OFFICE
	Stephen Kiss	Chair, Board of Commissioners 12/31/2016
	Mike Manus	Vice Chair, Board of Commissioners 12/31/2018

2. AUTHORIZED TO SIGN CONTRACTS/CONTRACT AMENDMENTS		
SIGNATURE	PRINT OR TYPE NAME	TITLE/TERM OF OFFICE
	Stephen Kiss	Chair, Board of Commissioners 12/31/2016
	Mike Manus	Vice Chair, Board of Commissioners 12/31/2018

3. AUTHORIZED TO SIGN REQUESTS FOR REIMBURSEMENT (A-19)		
SIGNATURE	PRINT OR TYPE NAME	TITLE/TERM OF OFFICE
	Steven West	E911 Coordinator
	JoAnn Boggs	Deputy Director

Please complete form with any new contract or any time personnel changes.
 Submit one original to State E911 Office