

COUNTY OF NEVADA
AUDITOR-CONTROLLER'S OFFICE
CONTRACT ENCUMBRANCE REQUEST FORM

RES: 16-452

This is for Board and CEO Contracts only. For Purchasing Agent contracts use the requisition process.

Requesting Dept: IGS Contact person: Pam Mowry
Completed by: " " "

Action:
New Change Amendments Encumbrance # _____

Fiscal Year 16-17 Board Meeting Date 9-13-16

New Vendor Vendor Data Form Attached

Vendor # 105039 Vendor Name: Granicus

Description: Annual maintenance & support of Legislar & other modules

Org Code(s)	Description:	Account(s)	PCN(s)	\$ Amount
1 0101-D1010-571-1000		521520	75100000	12,000
2 0101-11007-531-1000		521520	53100000	15,000
3				
4				
5				

Dept. Representative approval: *Pamela Mowry* Date: 9-13-16

Type of Encumbrance:

Board Approved Resolution # _____ CEO Approved Contract # _____

Type of Contract:

Multi-Year

Construction (C) Maintenance (M) Service (S) Franchise (F)

Lease (L) M.O.U. (U) Other (O)

Start/Stop Date: 6-1-16 to 6-30-17 Valid Insurance Certificate on file? Y Exp Date 6-30-17

CEO Contracts Only - items are to be scanned and attached by email (when applicable):

Risk Manager Insurance Form	Y	N
Valid Insurance Certificate	Y	N
Completed Independent Contractor Form	Y	N

Verified Signed BOS Reso/CEO Contract Y N

Assigned: _____ Control Number: _____ Encumbrance Number: _____

Entered by: _____ Date: _____ Dept. Contacted: _____