

ATTACHMENT B

Board Contract Summary

Board Contract Summary

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For use with Expenditure Contracts submitted to the Board for approval. Complete information below, print, obtain signature of authorized departmental representative, and submit this form, along with attachments, to the appropriate departments for signature. See also: *Auditor-Controller Intranet Policies->Contracts.*

D1.	Fiscal Year	2018-19 to 2020-21
D2.	Department Name	County Counsel
D3.	Contact Person	Anne Rierson
D4.	Telephone	805-568-2950

K1.	Contract Type (check one): <input checked="" type="checkbox"/> Personal Service <input type="checkbox"/> Capital	
K2.	Brief Summary of Contract Description/Purpose	Outside tax counsel
K3.	Department Project Number	13
K4.	Original Contract Amount	\$ NTE 30,000
K5.	Contract Begin Date	April 9, 2019
K6.	Original Contract End Date	April 8, 2021
K7.	Amendment? (Yes or No)	No
K8.	- New Contract End Date	
K9.	- Total Number of Amendments	
K10.	- This Amendment Amount	\$
K11.	- Total Previous Amendment Amounts	\$
K12.	- Revised Total Contract Amount	\$

B1.	Intended Board Agenda Date	April 9, 2019
B2.	Number of Workers Displaced (if any)	n/a
B3.	Number of Competitive Bids (if any)	n/a
B4.	Lowest Bid Amount (if bid)	n/a
B5.	If Board waived bids, show Agenda Date	n/a
	and Agenda Item Number	
B6.	Boilerplate Contract Text Changed? (If Yes, cite Paragraph)	Yes, outside counsel contract

F1.	Fund Number	0001
F2.	Department Number	13
F3.	Line Item Account Number	7650
F4.	Project Number (if applicable)	
F5.	Program Number (if applicable)	
F6.	Org Unit Number (if applicable)	
F7.	Payment Terms	Net 30

V1.	Auditor-Controller Vendor Number	006774
V2.	Payee/Contractor Name	Ice Miller LLP
V3.	Mailing Address	One American Square, Suite 2900
V4.	City State (two-letter) Zip (include +4 if known)	Indianapolis, IN 46282-0200
V5.	Telephone Number	317-592-4712
V6.	Vendor Contact Person	Audra Ferguson-Allen
V7.	Workers Comp Insurance Expiration Date	7/1/19
V8.	Liability Insurance Expiration Date	GL 7/1/19 Prof 1/1/20
V9.	Professional License Number	27835-41 (IN) 24104787 (TX)
V10.	Verified by (print name of county staff)	Anne Rierson

V11 Company Type (Check one): Individual Sole Proprietorship Partnership Corporation

I certify information is complete and accurate; designated funds available; required concurrences evidenced on signature page.

Date: 3/26/19 Authorized Signature: 