NON-PROCUREMENT DOCUMENTS ONLY
ROUTING COVER SHEET

Document Details	
Document Type	Grant Application
Parties	
County Contact Information	
Boulder County Legal Entity	Boulder County
Department	Sheriff
Division/Program	Operations
Mailing Address	5600 Flatiron Pkwy, Boulder CO
Contract Contact	Josh Bonafede jbonafede@bouldercounty.org
Invoice Contact	sheriffinvoices@bouldercounty.org
Other Party Contact Information	
Name	Colorado Division of Criminal Justice
Mailing Address	700 Kipling St, Ste 1000 Lakewood CO
Contact 1- *Name, title*	Kelly Abbott, grant manager
Contact 1- *email*	kelly.abbott@state.co.us
Contact 2	
Term	
Start Date	1/1/2024
Expiration Date	12/31/2025

Brief Description of Work/Services Provided
Grant will provide funding for POST certified academy training

Revenue Contract/Lease Details	
Amount	
Fixed Price or Not-to-Exceed?	
Grant Details	
Award # (if any)	
Signature Deadline	

NON-PROCUREMENT DOCUMENTS ONLY

Project/Program Name	
Project/Program Start Date	
Project/Program End Date	
Capital or Operating?	
Grant Funding	
Amount: Federal Funds	
Amount: State Funds	$42,000
Amount: Other (specify)	
Amount: Match (dollars)	
Amount: Match (in-kind)	
Total Project Budget	
Account String	
Federally Funded Grants	
Federal Program Name	
CFDA #	
Subrecipients	
Name(s)	
Services to be Provided	
Subaward Amount	
Subcontractors	
Name(s)	
Services to be Provided	
Subcontract Amount	
FileNet Contract Details - *Details should precisely match search variables in File Net (Only required where Original Agreement is stored in File Net)*	
Other Party Name	
Start Date	
End Date	
Amount	

NON-PROCUREMENT DOCUMENTS ONLY

| **Notes** |
| *Additional information not included above* |
| |

DocuSign Approvals (Initials):

_____ **Paralegal** (if required)

Cl
_____ **County Attorney** (if required)

_____ **Risk Management** (if required)

CW
_____ **Finance** (if required)

CW
_____ **EO/DH** (if required)

Claire Levy

Chair, Board of County Commissioners

ATTEST:

Cecilia Lacey

Clerk to the Board