

NON-PROCUREMENT DOCUMENTS ONLY

ROUTING COVER SHEET

Document Details	
Document Type	Grant Agreement
Parties	
County Contact Information	
Boulder County Legal Entity	Boulder County
Department	Sheriff
Division/Program	Office of Disaster Management (ODM)
Mailing Address	3280 Airport Road Boulder CO 80301
Contract Contact	Mike Chard mchard@bouldercounty.gov
Invoice Contact	sheriffinvoices@bouldercounty.gov
Other Party Contact Information	
Name	Department of Justice
Mailing Address	Washington DC
Contact 1- <i>Name, title</i>	Delka Gee, Grant Manager
Contact 1- <i>email</i>	delka.gee@usdoj.gov
Contact 2	
Term	
Start Date	12/29/2022
Expiration Date	12/31/2024
Brief Description of Work/Services Provided	
Grant will fund the BCSO Long Range Acoustical Device Siren System	
Revenue Contract/Lease Details	
Amount	
Fixed Price or Not-to-Exceed?	
Grant Details	
Award # (if any)	15JCOPS-23-GG-01912-TECP
Signature Deadline	

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Project/Program Name	
Project/Program Start Date	
Project/Program End Date	
Capital or Operating?	
Grant Funding	
Amount: Federal Funds	\$1,080,000
Amount: State Funds	
Amount: Other (specify)	
Amount: Match (dollars)	
Amount: Match (in-kind)	
Total Project Budget	\$1,080,000
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	

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Notes

Additional information not included above

DocuSign Approvals (Initials):

_____ **Paralegal** (if required)

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

_____ **Risk Management** (if required)

CW _____ **Finance** (if required)

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

Date:

Chair, Board of County Commissioners

ATTEST:

Clerk to the Board