

NON-PROCUREMENT DOCUMENTS ONLY

PT

ROUTING COVER SHEET

Document Details	
Document Type	Other
Parties	
County Contact Information	
Boulder County Legal Entity	Boulder County
Department	Sheriff
Division/Program	Operations
Mailing Address	5600 Flatiron Pkwy, Boulder CO
Contract Contact	Dave Salaman dsalaman@bouldercounty.gov
Invoice Contact	sheriffinvoices@bouldercounty.gov
Other Party Contact Information	
Name	Town of Superior
Mailing Address	124 E Coal Creek Dr, Superior CO 80027
Contact 1- Name, title	Matt Magley, Town Manager
Contact 1- email	mattm@superiorcolorado.gov
Contact 2	
Term	
Start Date	1/1/2024
Expiration Date	n/a
Brief Description of Work/Services Provided	
Amending the IGA with Town of Superior for law enforcement coverage	
Revenue Contract/Lease Details	
Amount	
Fixed Price or Not-to-Exceed?	
Grant Details	
Award # (if any)	
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	
Amount: State Funds	
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	

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Notes

Additional information not included above

DocuSign Approvals (Initials):

_____ **Paralegal** (if required)

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

_____ **Risk Management** (if required)

CW _____ **Finance** (if required)

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