

REQUEST FOR LEGISLATIVE ACTION

Version 6/10/19

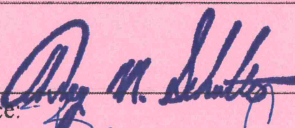
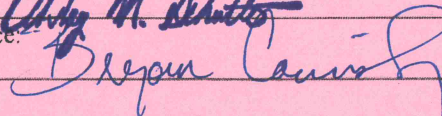
Completed by County Counselor's Office:

~~Res~~/Ord No.: 20520

Sponsor(s): Jeanie Lauer

Date: October 12, 2020

<p>SUBJECT</p>	<p>Action Requested <input checked="" type="checkbox"/> Resolution <input type="checkbox"/> Ordinance</p> <p>Project/Title: Authorizing the County Executive to execute an addendum for renewal of agreement for Medical Examiner services with the State of Missouri Department of Corrections, Western Missouri Region compensation payable to Jackson County.</p>											
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1" data-bbox="334 617 1414 804"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td></td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number:</td> <td style="text-align: right;">\$</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input checked="" type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: _____ Estimated Use: _____</p> <p>Prior Year Budget (if applicable): _____ Prior Year Actual Amount Spent (if applicable): _____</p>		Amount authorized by this legislation this fiscal year:	\$	Amount previously authorized this fiscal year:		Total amount authorized after this legislative action:	\$	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number:	\$
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Amount budgeted for this item * (including transfers):	\$											
Source of funding (name of fund) and account code number:	\$											
<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date): _____ Prior resolutions and (date): 13349 - 9/11/2000</p>											
<p>CONTACT INFORMATION</p>	<p>RLA drafted by (name, title, & phone) Kandi Brooke, Administrative Supervisor, 881-6595 for Dr. Marius Tarau, Chief Medical Examiner, 881-6609</p>											
<p>REQUEST SUMMARY</p>	<p>Authorizing the County Executive to execute an addendum for renewal of agreement for Medical Examiner services with the State of Missouri Department of Corrections, Western Missouri Region compensation payable to Jackson County.</p>											
<p>CLEARANCE</p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>											
<p>COMPLIANCE</p>	<p><input type="checkbox"/> MBE Goals <input type="checkbox"/> WBE Goals <input type="checkbox"/> VBE Goals</p>											
<p>ATTACHMENTS</p>	<p>Interagency Service Agreement</p>											
<p>REVIEW</p>	<p>Department Director: <i>Clayton Tarau MD</i></p>	<p>Date: <i>09/23/2020</i></p>										
	<p>Finance (Budget Approval): <i>If applicable</i></p> <p style="text-align: center; font-size: 2em;"><i>N/A</i></p>	<p>Date:</p>										

Division Manager:		Date:	10/8/2020
County Counselor's Office:		Date:	10/8/2020

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the _____ Fund in _____.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # _____
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.