



County of San Bernardino

F A S

CONTRACT TRANSMITTAL

FOR COUNTY USE ONLY

<input checked="" type="checkbox"/> New <input type="checkbox"/> Change <input type="checkbox"/> Cancel	Vendor Code	SC	Dept.	A	Contract Number			
County Department San Bernardino County Museum			Dept. CCM	Orgn. 800	Contractor's License No.			
County Department Contract Representative Robert L. McKernan			Telephone 307-2669		Total Contract Amount			
Contract Type <input checked="" type="checkbox"/> Revenue <input type="checkbox"/> Encumbered <input type="checkbox"/> Unencumbered <input type="checkbox"/> Other:								
If not encumbered or revenue contract type, provide reason: _____								
Commodity Code		Contract Start Date 10/19/10	Contract End Date 10/19/15	Original Amount	Amendment Amount			
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount		
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount		
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount		
Project Name BLM-California State Office			Estimated Payment Total by Fiscal Year					
			FY	Amount	I/D	FY	Amount	I/D

CONTRACTOR BUREAU OF LAND MANAGEMENT – CALIFORNIA STATE OFFICE

Federal ID No. or Social Security No. _____

Contractor's Representative Dr. Stephanie Demadio

Address 2800 Cottage Way, Suite W-1623 Sacramento, CA 95825 Phone (916) 978-4650

Nature of Contract: *(Briefly describe the general terms of the contract).*

Approve a Memorandum of Agreement (MOA) with Bureau of Land Management (BLM) whereby County Museum will provide for the care and management of archeological, historic and/or paleontological artifacts, specimens and associated records (collection) that are currently stored at the Imperial Valley College Curation Facility (IVCCF).

(Attach this transmittal to all contracts not prepared on the "Standard Contract" form.)

Approved as to Legal Form (sign in blue ink) <input type="checkbox"/> Dawn Messer, Deputy County Counsel Date _____	Reviewed as to Contract Compliance <input type="checkbox"/> _____ Date _____	Presented to BOS for Signature <input type="checkbox"/> Robert L. McKernan, Museum Director Date _____
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Auditor/Controller-Recorder Use Only

<input type="checkbox"/> Contract Database	<input type="checkbox"/> FAS
Input Date	Keyed By