

# REQUEST FOR BOARD ACTION / CONTRACT CONTROL FORM

**Tracking Number:** 8.

**Date of Request:** August 12, 2008

**Date Request Received:** August 12, 2008

**Board Meeting Date Requested:** August 18, 2008

**Board Meeting Date Assigned:** August 18, 2008

**Short Title:** Resolution Authorizing Contracts And Authorizing Purchase Orders For Fiscal Year 2008-2009: Mega Force: \$60,000; Attorney Tonya Lacewell Turner: \$69,000.

- Request Status:**
- Request is proceeding to Board of Commissioners
  - More information is needed – see attached
  - Request on hold – no further information needed
  - Other:

**Background:** Compared to the number of Hispanic clients we serve, DSS has a shortage of bi-lingual staff. In July 2003 the Pender County Department of Social Services contracted with Mega Force for bi-lingual staff to assist at the front desk and serve as interpreters to fill a necessary language-barrier-void.

*(Administrative Use Only)*

Attorney Tonya Lacewell Turner was hired May 2008 to replace Attorney Regina Floyd Davis who had served as DSS Attorney since 1998.

**CONTRACT TYPE**

- Renewal
- For Service(s)
- Intergovernmental – County as Grantee
  - Federal Grantor
  - State Grantor
  - Grant or
- County as Grantor
  - County Funds
  - Other Funds:
- Revision
- For Equipment

**Specific Action Requested:** The Board of Commissioners is requested to approve the contracts and authorize purchase orders to Mega Force and Attorney Tonya Lacewell Turner.

**PURCHASING** Budgeted Item:  Yes  No  
 Date Rec'd:  Reviewed and Approved  
 Comments on Reverse

Requested by: Reta M. Shiver  
 Department: Social Services  
 Title: Director  
 Contact Phone: 910.259.1240  
 Contact Fax: 910.259.1418

Date Sent: \_\_\_\_\_  
 Signed: \_\_\_\_\_

**ATTORNEY**  Reviewed and Approved  
 Date Rec'd:  Legal Problem(s)  
 Comments on Reverse

Date Sent: \_\_\_\_\_  
 Signed: \_\_\_\_\_

**FINANCE** Sufficient Funds  Available  
 Date Rec'd:  Not Available  
 Budget Amendment Necessary  
 Budgeted Amendment is Attached  
 Comments on Reverse

Date Sent: \_\_\_\_\_  
 Signed: \_\_\_\_\_

**CLERK** Signature(s) Required:  
 Board Chairman/County Manager  
 Other:

Date Rec'd Approved by Board:  Yes  No  
 At meeting on \_\_\_\_\_

