

**WHATCOM COUNTY  
CONTRACT INFORMATION SHEET**

Whatcom County Contract Number:  
202406037 - 2

Originating Department:	85 Health and Community Services
Division/Program: (i.e. Dept. Division and Program)	8540 Environmental Health / 854080 Solid Waste Infrastructure
Contract or Grant Administrator:	Jennifer Hayden
Contractor's / Agency Name:	Sustainable Connections

Is this a New Contract?	If not, is this an Amendment or Renewal to an Existing Contract?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #:	202406037	

Does contract require Council Approval?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	If No, include WCC:
Already approved? Council Approved Date:	(Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)		

Is this a grant agreement?	If yes, grantor agency contract number(s):	ALN#:
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		

Is this contract grant funded?	If yes, Whatcom County grant contract number(s):	Cash grant – no associated contract # (through 06/30/2025)
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		

Is this contract the result of a RFP or Bid process?	If yes, RFP and Bid number(s):	24-18	Contract Cost Center:	18571006
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				

Is this agreement excluded from E-Verify?	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>
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- If YES, indicate exclusion(s) below:
- |   |  |
|---|--|
| <input type="checkbox"/> Professional services agreement for certified/licensed professional. | <input type="checkbox"/> Goods and services provided due to an emergency.    |
| <input type="checkbox"/> Contract work is for less than \$100,000.                            | <input type="checkbox"/> Contract for Commercial off the shelf items (COTS). |
| <input type="checkbox"/> Contract work is for less than 120 days.                             | <input type="checkbox"/> Work related subcontract less than \$25,000.        |
| <input type="checkbox"/> Interlocal Agreement (between Governments).                          | <input type="checkbox"/> Public Works - Local Agency/Federally Funded FHWA.  |

Contract Amount:(sum of original contract amount and any prior amendments):	Council approval required for; all property leases, contracts or bid awards <b>exceeding \$40,000</b> , and professional service contract amendments that have an increase greater than \$10,000 or 10% of contract amount, whichever is greater, <b>except when:</b> 1. Exercising an option contained in a contract previously approved by the council. 2. Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance. 3. Bid or award is for supplies. 4. Equipment is included in Exhibit "B" of the Budget Ordinance 5. Contract is for manufacturer's technical support and hardware maintenance of electronic systems and/or technical support and software maintenance from the developer of proprietary software currently used by Whatcom County.
\$ 101,875	
This Amendment Amount:	
\$ 11,667	
Total Amended Amount:	
\$ 113,542	

Summary of Scope: This amendment adds funding for the Food Recovery Program during the current contract period.

Term of Contract:	1 Year	Expiration Date:	06/30/2025
Contract Routing:	1. Prepared by:	JT	Date: 01/16/2025
	2. Health Budget Approval	CR	Date: 02/12/2025
	3. Attorney signoff:	Christopher Quinn	Date: 02/12/2025
	4. AS Finance reviewed:	Bbennett	Date: 02/26/2025
	5. IT reviewed (if IT related):		Date:
	6. Contractor signed:		Date:
	7. Executive Contract Review:		Date:
	8. Council approved (if necessary):	AB2025-200	Date:
	9. Executive signed:		Date:
	10. Original to Council:		Date:

**WHATCOM COUNTY CONTRACT AMENDMENT**

**PARTIES:**

**Whatcom County  
Whatcom County Health and Community Services  
509 Girard Street  
Bellingham, WA 98225**

**AND CONTRACTOR:  
Sustainable Connections  
1701 Ellis Street, Suite 221  
Bellingham, WA 98225**

**CONTRACT PERIODS:**

**Original: 07/01/2024 – 06/30/2025  
Amendment #1: 08/05/2024 – 06/30/2025  
Amendment #2: 03/12/2025 – 06/30/2025**

**THE CONTRACT IDENTIFIED HEREIN, INCLUDING ANY PREVIOUS AMENDMENTS THERETO, IS HEREBY AMENDED AS SET FORTH IN THE DESCRIPTION OF THE AMENDMENT BELOW BY MUTUAL CONSENT OF ALL PARTIES HERETO**

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**DESCRIPTION OF AMENDMENT:**

1. Amend Exhibit B – Compensation, to increase funding by \$11,667 for the Food Recovery Program.
2. Funding for the total contract period (07/01/2024 – 06/30/2025) is not to exceed \$113,542.
3. All other terms and conditions remain unchanged.
4. The effective start date of the amendment is 03/12/2025.

ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND ANY PREVIOUS AMENDMENTS THERETO REMAIN IN FULL FORCE AND EFFECT. ALL PARTIES IDENTIFIED AS AFFECTED BY THIS AMENDMENT HEREBY ACKNOWLEDGE AND ACCEPT THE TERMS AND CONDITIONS OF THIS AMENDMENT. Each signatory below to this Contract warrants that he/she is the authorized agent of the respective party; and that he/she has the authority to enter into the contract and bind the party thereto.

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APPROVAL AS TO PROGRAM: \_\_\_\_\_  
Sue Sullivan, Environmental Health Manager Date

DEPARTMENT HEAD APPROVAL: \_\_\_\_\_  
Erika Lautenbach, Health and Community Services Director Date

APPROVAL AS TO FORM: \_\_\_\_\_  
Christopher Quinn, Chief Civil Deputy Prosecutor Date

FOR THE CONTRACTOR:

Derek Long, Executive Director		
Contractor Signature	Printed Name and Title	Date

FOR WHATCOM COUNTY:

\_\_\_\_\_  
Satpal Singh Sidhu, County Executive Date

**CONTRACTOR INFORMATION:**

**Sustainable Connections**  
1701 Ellis Street, Suite 221  
Bellingham, WA 98225  
360-647-7093  
[derekl@sustainableconnections.org](mailto:derekl@sustainableconnections.org)

**EXHIBIT "B" – Amendment #2**  
(COMPENSATION)

**Budget and Source of Funding:** The source of funding for this contract is the Solid Waste Fund. The budget and total funding for this contract is as follows:

<b>Commercial Waste Reduction and Recycling Program:</b>		
<b>Cost Description</b>	<b>Documents Required with Each Invoice</b>	<b>Budget</b>
Personnel – salaries & benefits	Detailed general ledger report	\$57,391
Mileage	See Exhibit B.1(6.c)	\$300
Supplies – including bins, plaques, signage for Whatcom County businesses and events	Copies of paid invoices or receipts	\$700
Printing – signs, fliers, information sheets		\$700
<b>SUBTOTAL</b>		\$59,091
Indirect @ 10%		\$5,909
<b>TOTAL</b>		<b>\$65,000</b>

<b>Food Recovery Initiative Program:</b>		
<b>Cost Description</b>	<b>Documents Required Each Invoice</b>	<b>Budget</b>
Personnel – salaries & benefits	Detailed general ledger report;	\$33,219
Americorp Placement	Paid invoices, as applicable	\$7,410
Mileage	See Exhibit B.1(6.c)	\$800
Supplies – including bins, plaques, signage for Whatcom County businesses and events (excludes volunteer appreciation incentives)	Copies of paid invoices or receipts	\$1,700
Printing – signs, fliers, information sheets		\$500
Volunteer Appreciation Incentives	Distribution log documenting: <ul style="list-style-type: none"> <li>• Recipient name</li> <li>• Date of receipt</li> <li>• Signature or email confirmation upon receipt by recipient</li> <li>• Distribution amount</li> </ul>	\$500
<b>SUBTOTAL</b>		\$44,129
Indirect @ 10%		\$4,413
<b>TOTAL</b>		<b>\$48,542</b>

**Refer to Exhibits B.1 and B.2 for additional invoicing requirements and information.**

<b>Contractor's Invoicing Contact Information:</b>	
<b>Name</b>	Derek Long
<b>Phone</b>	360-647-7092
<b>Email</b>	<a href="mailto:derekl@sustainableconnections.org">derekl@sustainableconnections.org</a>

## EXHIBIT "B.1" – Invoicing – General Requirements

1. When applicable, the contractor may transfer funds among budget line items in an amount not to exceed 10% of the total budget. Line item changes that exceed 10% must be pre-approved by the County Contract Administrator, prior to invoicing.
2. When applicable, indirect costs and fringe benefit cost rates may not exceed the amount indicated in Exhibit B or the Contractor's federally approved indirect cost rate.
3. The Contractor shall submit invoices indicating the County-assigned contract number to:  
[HL-BusinessOffice@co.whatcom.wa.us](mailto:HL-BusinessOffice@co.whatcom.wa.us) and [JHayden@co.whatcom.wa.us](mailto:JHayden@co.whatcom.wa.us)
4. The Contractor shall submit itemized invoices on a monthly basis in a format approved by the County and by the 15<sup>th</sup> of the month, following the month of service, except for January and July where the same is due by the 10<sup>th</sup> of the month.
5. When applicable, the Contractor will utilize grant funding sources in the order of their expiration date as indicated by the County, prior to spending local funding sources, when no funding restrictions prevent doing so.
6. The contractor shall submit the required invoice documentation identified in Exhibit B.
  - a. The County reserves the right to request additional documentation in order to determine eligible costs. Additional documentation must be received within 10 business days of the County's request.
  - b. When applicable, if GL reports for personnel reimbursement do not specify position titles, additional documentation must be provided that includes staff name and position title.
  - c. When applicable, mileage will be reimbursed at the current GSA rate ([www.gsa.gov](http://www.gsa.gov)). Reimbursement requests for mileage must include:
    1. Name of staff member
    2. Date of travel
    3. Starting address (including zip code) and ending address (including zip code)
    4. Number of miles traveled
  - d. When applicable, travel and/or training expenses will be reimbursed as follows:
    1. Lodging and meal costs for training are not to exceed the current GSA rate ([www.gsa.gov](http://www.gsa.gov)), specific to location.
    2. Ground transportation, coach airfare and ferries will be reimbursed at cost when accompanied by receipts.
    3. Reimbursement requests for allowable travel and/or training must include:
      - a. Name of staff member
      - b. Dates of travel
      - c. Starting point and destination
      - d. Brief description of purpose
      - e. Receipts for registration fees or other documentation of professional training expenses.
      - f. Receipts for meals are not required.
7. Payment by the County will be considered timely if it is made within 30 days of the receipt and acceptance of billing information from the Contractor.
8. The County may withhold payment of an invoice if the Contractor submits it or the required invoice documentation, more than 30 days after the month of services performed and/or the expiration of this contract.
9. Invoices must include the following statement, with an authorized signature and date: **I certify that the materials have been furnished, the services rendered, or the labor performed as described on this invoice.**
10. Duplication of billed costs or payments for service: The Contractor shall not bill the County for services performed or provided under this contract, and the County shall not pay the Contractor, if the Contractor has been or will be paid by any other source, including grants, for those costs used to perform or provide the services in this contract. The Contractor is responsible for any audit exceptions or disallowed amounts paid as a result of this contract.

## EXHIBIT "B.2" – Invoice Preparation Checklist for Vendors

The County intends to pay you promptly. Below is a checklist to ensure your payment will be processed quickly. Provide this to the best person in your company for ensuring invoice quality control.

- Send the invoices to the correct address:  
[HL-BusinessOffice@co.whatcom.wa.us](mailto:HL-BusinessOffice@co.whatcom.wa.us) and [JHayden@co.whatcom.wa.us](mailto:JHayden@co.whatcom.wa.us)
- Submit invoices monthly, or as otherwise indicated in your contract.

### Verify that:

- the time period for services performed is clearly stated and within the contract term beginning and end dates. Also verify any other dates identified in the contract, such as annual funding allocations;
- invoice items have not been previously billed or paid, given the time period for which services were performed;
- enough money remains on the contract and any amendments to pay the invoice;
- the invoice is organized by task and budget line item as shown in Exhibit B;
- the Overhead or Indirect Rate costs match the most current approved rate sheet;
- the direct charges on the invoice are allowable by contract. Eliminate unallowable costs.
- personnel named are explicitly allowed for within the contract and the Labor Rates match the most current approved rate sheet;
- back-up documentation matches what is required as stated in Exhibit B and B.1;
- contract number is referenced on the invoice;
- any pre-authorizations or relevant communication with the County Contract Administrator is included; and
- Check the math.

### Whatcom County will not reimburse for:

- Alcohol or tobacco products;
- Traveling Business or First Class; or
- Indirect expenses exceeding 10% except as approved in an indirect or overhead rate agreement.