

Request for Legal Assistance  
DCSD Office of Legal Affairs  
ATTORNEY – CLIENT COMMUNICATION

DATE RECEIVED: _____
MATTER ASSIGNED TO: _____

PLEASE SUBMIT COMPLETED REQUEST FORM TO  
DCSD OFFICE OF LEGAL AFFAIRS.

\*\*\* This request is a confidential communication and should be treated as such \*\*\*

**DESCRIPTION OF REQUEST**

Title of Item/Topic: Legal Review and Approval – Board Agenda Item Only  
(e.g., contract review, policy matter, etc.)

Date of request: 9/10/2024 Due Date: 9/13/2024 (Allow 3 to 5 business days)

Background information/Detail: Contract Award – Bid 24-26 School Nutrition Small Wares Equipment – Sam Tell and Son, Inc. – Not to Exceed \$250,000 SY24-25

**PROCUREMENT DETAILS (if applicable)**

Include details confirming that all applicable DCSD procurement policies and requirements have been adhered to: \_\_\_\_\_

**SUPPORTING DOCUMENTATION**

Please attach/include any additional supporting documentation that are relevant to your request.

Description of supporting documentation, if any Chronology and all applicable documents

**REQUIRED AUTHORIZATION**

Requested by: Darlene Y. Hughes

Email: darlene\_hughes@dekalbschoolsga.org Telephone: 678-676-1447

Department: Operations Division

Cabinet Member authorizing the request: Erick Hofstetter

**LEGAL APPROVAL**

Approved as to form by the DCSD Office of Legal Affairs?  Yes  No

Approving Attorney *H. Eric Hilton*

\*If approved by outside counsel indicate approving attorney and law firm \_\_\_\_\_

Comments: \_\_\_\_\_