

Contract #: 440-S0411

CONTRACT ROUTING SHEET

Date Prepared: 2/26/04

Need Date: _____

PROCESSING DEPARTMENT:

Department: CAO/Proc. & Contracts
Dept. Contact: Sue Hennike
Phone #: 5833

CONTRACTOR:

Name: Alpine County Probation
Address: P.O. Box 458
Markleeville, CA 96120
Phone: 694-2192

Head Signature: [Signature]

CONTRACTING DEPARTMENT:

Probation

Service Requested: EDC to House Wards of Other Counties in Juvenile Hall
Contract Term: Perpetual Contract Value: Review - General
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: _____

COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: Disapproved: _____ Date: 3-1-04 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: Disapproved: _____ Date: 3/1/04 By: [Signature]
Approved: _____ Disapproved: _____ Date: _____ By: _____

MAR 01 2004

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____