


CONTRACT ROUTING SHEET

Date Prepared: 11/28/2017

Need Date: 12/15/2017

PROCESSING DEPARTMENT:

Department: Purchasing
Dept. Contact: Rick Blake
Phone #: (530)621-5873
Department
Head Signature: 

CONTRACTOR:

Name: El Dorado Hills Fire Department
Address: 1050 Wilson Boulevard
El Dorado Hills, CA 95762
Phone: 916-933-6623
Fax: _____

CONTRACTING DEPARTMENT: Sheriff's Office

Service Requested: Approval of Surplus Donation Agreement
Contract Term: 1 Time Amendment Value: \$0.00
Compliance with Human Resources requirements? Yes: _____ No: _____
Compliance verified by: _____

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

Approved: cond'l Disapproved: _____ Date: 12/14/17 By: JDK
Approved: _____ Disapproved: _____ Date: _____ By: _____

EL DORADO COUNTY COUNSEL
2017 NOV 29 AM 9:37

↳ subject to making the revisions noted.

Revisions made - (R3) 12/15/17

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

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

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

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

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